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ABSTRACT

This directory lists all projects funded by the National Institute of Disability and Rehabilitation Research (NIDRR) during the 1999 fiscal year. It includes summaries, funding data, and contact information for a broad range of programs. Programs are grouped into the following research priorities: (1) employment outcomes; (2) health and function; (3) technology for access and function; (4) independent living and community integration; (5) associated disability research areas; (6) knowledge dissemination and utilization; (7) Americans with Disabilities Act technical assistance projects; (8) capacity building for rehabilitation research training; and (9) state technology assistance. Appendices provide a subject index, an index by grantees, an index of projects by state, an index by principal investigators, and a listing of NIDRR projects by program type. (CR)

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ED 444 303

National Institute on Disability
and Rehabilitation Research
U.S. Department of Education
Washington, DC

NATIONAL INSTITUTE ON DISABILITY
AND REHABILITATION RESEARCH
NIDRR

NIDRR Program Directory
Fiscal Year 1999

> The new paradigm of disability is integrative and holistic, and focuses on the whole person functioning in an environmental context.
>
> —*NIDRR's Long Range Plan*

EC 307993

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National Institute on Disability and Rehabilitation Research
Program Directory 1999

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Introduction

The mission of the National Institute on Disability and Rehabilitation Research (NIDRR) is to generate, disseminate and promote knowledge that will improve the lives of persons with disabilities in their communities. NIDRR conducts comprehensive and coordinated programs of research and related activities to assist in the achievement of the full inclusion, social integration, employment, and independent living of people with disabilities. This edition of the NIDRR Program Directory lists all projects funded by NIDRR during the 1999 fiscal year.

NIDRR's proposed Long-Range Plan, announced in the Federal Register, December 7, 1999 (http://www.ed.gov/legislation/FedRegister/), provides background on NIDRR's conceptual base. It describes the "new paradigm of disability," which posits that disability is an interaction between the individual and the environment. NIDRR's research focus includes such areas as: employment outcomes, health and function, technology for access and function, independent living and community integration, associated disability research areas, knowledge dissemination and utilization, and capacity building for rehabilitation and international activities. For detailed descriptions of these areas, consult the Long-Range Plan.

NIDRR's Research Program

NIDRR's research is conducted via a network of individual research projects and centers of excellence throughout the country. Most NIDRR grantees are universities or providers of rehabilitation or related services. NIDRR's largest funding programs are the Rehabilitation Research and Training Centers (RRTCs) and Rehabilitation Engineering Research Centers (RERCs). NIDRR also makes awards for information dissemination and utilization centers and projects, field initiated projects, research and development projects, advanced research training projects, Mary E. Switzer fellowships, small business innovative research, and model systems of care. NIDRR also administers the State Technology Assistance Projects and the Disability and Business Technical Assistance Centers.

Disability and Rehabilitation Research Projects

The Disability and Rehabilitation Research Projects (DRRP) program allows for projects with special emphasis on research, demonstrations, training, dissemination, utilization, and technical assistance. Projects may include combinations of these activities. True to the mission of NIDRR, these projects may develop methods, procedures, and rehabilitation technology to assist in achieving the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities, especially individuals with the most significant disabilities, or to improve the effectiveness of services authorized under the Rehabilitation Act.

Model Systems

NIDRR administers programs that have become world-renowned model systems of care for persons with spinal cord injuries, burns, and traumatic brain injuries. The Model Systems establish innovative projects for the delivery, demonstration, and evaluation of comprehensive medical, vocational, and other rehabilitation services. The work of the Model Systems begins at the point of injury and ends with successful re-entry into full community life.

Advanced Rehabilitation Research Training Projects

The Advanced Rehabilitation Research Training (ARRT) Program (formerly known as the Research Training Grants Program) expands the capacity of the field of rehabilitation research by providing advanced training opportunities. These projects provide rehabilitation research training for persons with clinical or other experience, who may be lacking certain formal research training. Grants are made to institutions to recruit qualified persons with doctoral or similar advanced degrees with clinical, management, or basic science research experience, and prepare them to conduct independent research on problems related to disability and rehabilitation. This research training may integrate disciplines, teach research methodology in the environmental or new paradigm context, and promote the capacity for Disability Studies and rehabilitation science. These training programs must operate in interdisciplinary environments and provide training in rigorous scientific methods.

Rehabilitation Research and Training Centers

NIDRR's Rehabilitation Research and Training Centers (RRTCs) conduct coordinated and integrated advanced programs of research targeted toward the production of new knowledge, which may improve rehabilitation methodology and service delivery systems, alleviate or stabilize disabling conditions, or promote maximum social and economic independence for persons with disabilities. Operated in collaboration with institutions of higher education or providers of rehabilitation or other appropriate services, RRTCs serve as centers of national excellence in rehabilitation research. Also, they are national or regional resources for research information for individuals with disabilities and the parents, family members, guardians, advocates, or authorized representatives of the individuals. These centers also conduct related training programs, including graduate, pre-service and in-service training. The centers also disseminate and promote the utilization of research findings.

Rehabilitation Engineering Research Centers

Rehabilitation Engineering Research Centers (RERCs) conduct programs of advanced research of an engineering or technical nature designed to apply advanced technology, scientific achievement, and psychological and social knowledge to solve rehabilitation problems and remove environmental barriers. Each center is affiliated with one or more institutions of higher education or nonprofit organizations. The RERCs' work in a rehabilitation setting provides an environment for cooperative research and the transfer of rehabilitation technologies into rehabilitation practice. Involved at both the individual and systems levels, RERCs seek to find and evaluate the newest technologies, products, and methods that ultimately can benefit the independence of persons with disabilities and the universal design of environments for all people of all ages. The centers also exchange technical and engineering information worldwide and improve the distribution of technological devices and equipment to individuals who need them.

State Technology Assistance Projects

This program supports statewide, consumer-driven, technology-related assistance networks for individuals of all ages and disabilities. States and territories are eligible to apply for one grant per entity which spans a total of ten years of Federal funding. The first phase is a development grant and lasts for three years. The second phase is known as the first extension and can last for two more years. The third and final phase is known as the second extension and lasts for five additional years. The Assistive Technology Act of 1998 (AT Act) authorized three additional years for States that have completed ten years, at a reduced funding level.

Fellowships

Fellowships, named for the late Mary E. Switzer, give individual researchers the opportunity to develop new ideas and gain research experience. There are two levels of fellowships: Distinguished Fellowships and Merit Fellowships. Distinguished Fellowships go to individuals of doctorate or comparable academic status, who have had seven or more years of experience relevant to rehabilitation research. Merit Fellowships are given to persons with rehabilitation research experience, but who do not meet the qualifications for Distinguished, usually because they are in earlier stages of their careers. Fellows work for one year on an independent research project of their design.

ADA Technical Assistance Projects

NIDRR administers a network of grantees to provide information, training, and technical assistance to businesses and agencies with responsibilities under the Americans with Disabilities Act (ADA). Ten regional Disability and Business Technical Assistance Centers (DBTACs) are funded to provide information and referral, technical assistance, public awareness, and training on all aspects of the ADA. Several National Training Projects target particular groups, organizations, or subject areas for ADA training and the ADA Technical Assistance coordinator contract assists all of the grantees with their activities.

Small Business Innovative Research

Small Business Innovative Research (SBIR) grants help support the production of new assistive and rehabilitation technology. This two-phase program takes a product from development to market readiness.

NIDRR Contracts

Through its contracts, NIDRR seeks improved methods, systems, products, and practices to add to its work. The contracts are for specific activities related to management, research, and information dissemination.

NARIC and the *NIDRR Program Directory*

The *Program Directory* is compiled by the National Rehabilitation Information Center (NARIC). NARIC functions as NIDRR's library, providing the rehabilitation community with information and referral services to help locate pertinent research related to specific areas of expertise. Since 1977, NARIC has been the primary source of rehabilitation and disability information generated by NIDRR funds, with special priority services to NIDRR staff and NIDRR-funded project staff.

NARIC also produces a companion to the *Program* Directory, which is the *Compendium of Products by NIDRR Grantees and Contractors.* Copies of NIDRR-supported research products are received by NARIC and added to the reference collection and Compendium database. Information about holdings are available online at http://www.naric.com.

Neither NARIC nor NIDRR assumes liability for the *Directory's* contents or the use thereof. NARIC does not evaluate or certify the programs or products of the organizations listed in the *Directory*.

This *Directory* is not intended for use as a fiscal document to show how NIDRR funds are allocated; its purpose is to display the range of programs that NIDRR supports. This listing is current as of October 1, 1999.

NARIC operates under U.S. Department of Education contract ED-99-CO-0057.

Employment Outcomes

NIDRR seeks to improve employment outcomes for people with disabilities by funding research into a wide spectrum of employment and disability issues, including economics; Federal, State, and community employment programs; accommodation; technology; education; and ergonomics and the work environment.

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Rehabilitation Research and Training Center for Persons Who Are Deaf or Hard of Hearing

University of Arkansas
4601 West Markham Street
Little Rock, AR 72205
dwatson@comp.uark.edu
http://www.uark.edu/depts/rehabres

Principal Investigator: Douglas Watson, PhD
Public Contact: 501/686-9691 (V/TTY); Fax: 501/686-9698

Project Number: H133B60002
Start Date: September 30, 1996
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 96 $650,000; FY 97 $650,000; FY 98 $668,963; FY 99 $650,000
Other funding: FY 98 $50,000 (Rehabilitation Services Administration)
Abstract: The Center identifies the employability enhancement needs of the target population, and discovers basic knowledge about these problems from the perspective of individual and environment. The Center translates this information into guidelines for change, assessment, and interventions, evaluates the appropriateness and effectiveness of the new methods, disseminates them to enhance service delivery, and evaluates their impact and implementation.

Research and Training Center on Maintaining the Employment Status and Addressing the Personal Adjustment Needs of Individuals Who Are Hard of Hearing or Late Deafened

California School of Professional Psychology-San Diego (CSPP-SD)
6160 Cornerstone Court East
San Diego, CA 92121-3725
rrtc@mail.cspp.edu
http://www.hearinghealth.org

Principal Investigator: Raymond J. Trybus, PhD
Public Contact: T. Jordon Goulder, PhD, Director of Training, 619/623-2777, ext. 388 (V); 800/432-7619 (TTY); Fax: 619/642-0266

Project Number: H133B70016
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $499,911; FY 99 $499,911
Abstract: This Center implements a series of projects involving hearing loss and workplace issues through collaboration with business, professional, and consumer organizations. The primary target populations are accessed through a network of schools and state agencies. Project examples include the identification of factors that have a negative impact on the employment status of people with hearing impairments. Data sources include affiliations through career planning at schools, patients in Veteran's Affairs hospitals, local minority communities, the Council of Latino Agencies, Howard University, and the University of Arizona Research and Training Center on Native Americans. Interventions include review of assistive technology, career planning, mental health, and "rights training" in relation to the ADA. The project provides workshops for families and employers, establishes support groups for people with cochlear implants, and creates a family life center project: a "one stop shopping" facility where individuals with hearing loss can obtain a variety of interventions, information, and guidance regarding services and devices. Dissemination includes information on the ADA and Tech Act. Training targets groups, including employers, consumers, and human resource organizations.

Rehabilitation Research and Training Center on Workforce Investment and Employment Policy for Persons with Disabilities

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Community Options, Inc.
1130 - 17th Street Northwest, Suite 430
Washington, DC 20036
michael.morris@comop.org
http://www.comop.org

Principal Investigator: Michael Morris; Peter Blanck; Michael Collins; Robert Silverstein
Public Contact: Michael Morris, Project Director, 202/721-0120; Fax: 202/721-0124

Project Number: H133B980042
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $450,000; FY 99 $450,000
Abstract: This Center helps expand, improve, and modify disability policy and other more general policies in order to improve the employment status of Americans with disabilities and increase their independence and self-sufficiency. Based on research from this project and other NIDRR-funded projects, this project establishes an information and technical assistance resource to government leaders and decision makers at state and federal levels, individuals with disabilities, parents and family members, and other interested parties, offering new and revised approaches to workforce development and employment policy. Studies conducted by this project include: (1) an analysis of the relationship between select federal and state policies upon the employment of people with disabilities, (2) an analysis of the policy-based implications of outcome-based reimbursement on the delivery of employment and rehabilitation services to people with disabilities, and (3) an analysis of the effect of civil rights protections and multiple environmental factors on promoting or depressing the employment status of people with disabilities. The Center actively seeks to be outcome-focused and involve individuals with disabilities, parents, and family members in all facets of project activities, including training, research, information dissemination, and technical assistance.

Rehabilitation Research and Training Center on Educational Supports

University of Hawaii at Manoa
1776 University Avenue/UA4-6
Honolulu, HI 96822
stodden@hawaii.edu; huap@hawaii.edu
http://www.rrtc.Hawaii.edu

Principal Investigator: Robert Stodden, PhD
Public Contact: Audray Holm; Valerie Shearer, 808/956-3975; 808/956-2673; Fax: 808/956-5713

Project Number: H133B980043
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000; FY 99 $605,000
Abstract: The research this project conducts on educational supports is designed to increase access to postsecondary education programs and improve outcomes for people with disabilities. The research includes: (1) examining and evaluating the current status of educational supports, including (a) individual academic accommodations, (b) adaptive equipment, (c) case management and coordination, (d) advocacy, and (e) personal counseling and career advising; (2) identifying effective support practices and models of delivery that contribute to successful access, performance, and retention and completion of postsecondary programs; (3) identifying specific barriers to the provision of disability-related services, including policy and funding requirements; (4) assessing the effectiveness of promising educational practices and disability-related services that are important to career mobility and success in the workplace; (5) testing the effectiveness of specific models of delivery that are believed to increase the accessibility of educational supports and innovative technologies; (6) identifying the types of educational and transitional assistance that postsecondary programs provide to improve educational and subsequent labor market success; (7) providing training, technical assistance, and information to support personnel, public and private rehabilitation personnel, career placement specialists, and students with disabilities based on the findings and implications of the research program; and (8) implementing a consumer-driven empowerment evaluation plan for assessment of the Center's progress in achieving its goals. Additional goals include conducting national surveys and field studies within diverse postsecondary educational settings, and implementing an innovative and integrated training, technical assistance, and dissemination model to ensure the application and sustainability of research-proven policy and practice.

Rehabilitation Research and Training Center on State Systems and Employment

Children's Hospital
Institute for Community Inclusion
300 Longwood Avenue
Boston, MA 02115
ici@a1.tch.harvard.edu
http://www.childrenshospital.org/ici/rrtc

Principal Investigator: William E. Kiernan, PhD
Public Contact: John Butterworth, PhD, 617/355-7074; Fax: 617/355-7940

Project Number: H133B980037
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: This Center identifies effective practices in coordinated employment efforts and facilitates such development at local, regional, and state levels. It also influences policy, practice, and perceptions on the national level. Project activities include investigations, technical assistance, and public policy reviews focused on: (1) examining state service systems, including vocational rehabilitation, mental health, mental retardation, employment and training service (including one-stop career centers and welfare-to-work programs), and education to document promising policies and practices reflecting integrated and coordinated approaches to employment of people with disabilities; (2) documenting actual employment outcomes for people with disabilities through the analysis of national, state, and local data collection systems; (3) documenting strategies state agencies use for overcoming barriers to employment at the state and local levels; (4) examining, documenting, and disseminating practices at the state level that respond to the employment and support needs of SSI and SSDI beneficiaries; and (5) reviewing and evaluating strategies and approaches to develop a more integrated employment approach at the federal and state levels, in order to enhance the employment of people with disabilities.

Rehabilitation Research and Training Center on Blindness and Low Vision

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Mississippi State University
P.O. Box 6189
Mississippi State, MS 39762
schaefer@ra.msstate.edu
http://www.blind.msstate.edu

Principal Investigator: J. Elton Moore, EdD
Public Contact: 662/325-2001 (V); 662/325-8693 (TTY); Fax: 662/325-8989

Project Number: H133B60001
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 96 $650,000; FY 97 $650,000; FY 98 $676,736; FY 99 $650,000
Other funding: FY 96 $98,463; FY 98 $194,012 (Rehabilitation Services Administration)
Abstract: The Center conducts a series of research, training, and dissemination projects relating to blindness and low vision, using a multidisciplinary strategy. The project works to investigate and document employment status, identify barriers to employment and techniques and reasonable accommodations to overcome these barriers, identify training needs in the Business Enterprise Program, and develop and deliver training programs. Training and dissemination activities include an information and referral center, national conferences, inservice training and technical assistance, advanced training for practitioners, advanced training in research, and publication and distribution of a variety of materials in accessible media.

Rehabilitation Research and Training Center on Rural Rehabilitation Services

University of Montana
52 Corbin Hall
Missoula, MT 59812
muarid@selway.umt.edu
http://ruralinstitute.umt.edu/rtcrural

Principal Investigator: Tom Seekins, PhD
Public Contact: 888/268-2743 (V/TTY, information service only); 406/243-5467 (V/TTY); Rural Disability Information Network [RUDI] BBS numbers: 406/243-2318; 800/961-9610 (In MT and WY); Fax: 406/243-2349

Project Number: H133B70017
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 97 $500,000; FY 98 $550,000; FY 99 $550,000
Abstract: This RRTC conducts and disseminates research and provides training that improves the capacity of rural environments to support people with disabilities in living and working independently. Rural Employment and Economic Development Projects concentrate on employment and vocational rehabilitation service needs, including self-employment as a vocational option for rural people with disabilities. These project components explore the role of rural economic development in meeting the needs of people with disabilities, and ways that rural citizens with disabilities can assume community leadership. Rural Community Development, Independent Living, and Telecommunications components look at how rural independent living services, transportation services, accessible housing, and telecommunications are funded, and ways to improve rural access to these services. Health Care projects conduct research to improve access to rural health care services, including health promotion activities that might reduce the incidence of secondary conditions. American Indian project components work with American Indian tribes to develop culturally sensitive ways to discuss disability issues, such as ensuring environmental, programmatic, and social access for tribal members with disabilities; and developing appropriate long-term care options for elders and people with disabilities or chronic conditions. Methodology: the RRTC approaches its research areas from a community psychology perspective. Cross-cutting measures of importance include participation, engagement, and a psychological sense of community.

Rehabilitation Research and Training Center for Economic Research on Employment Policy for Persons with Disabilities

Cornell University
Program on Employment and Disability
School of Industrial and Labor Relations
106 ILR Extension Building
Ithaca, NY 14853-3901
smb23@cornell.edu
http://www.ilr.cornell.edu/ped/projects/default.html

Principal Investigator: Susanne Bruyère, PhD; Richard Burkhauser, PhD; David Stapleton, PhD
Public Contact: Susanne Bruyère, PhD, 607/255-7727 (V); 607/255-2891 (TTY); Fax: 607/255-2763

Project Number: H133B980038
Start Date: December 16, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: Using principles of economics, this project conducts policy research on how environmental factors influence the work outcomes of people with disabilities. Research also addresses critical aspects of employment outcomes, recognizing the heterogeneity of people with disabilities, and explains the importance of interactions among the multiplicity of programs intended to meet the employment needs of people with disabilities. Components include: (1) a comprehensive analysis, using existing panel data, of the current employment status of people with disabilities; (2) a longitudinal analysis of the effects of labor market change on the employment and earnings of people with disabilities; (3) a longitudinal analysis of return-to-work after the onset of a disability; (4) a longitudinal analysis of the impact of civil rights protections on the employment and earnings of people with disabilities; (5) identification and analysis of policies that foster or impede the participation of transitioning students in rehabilitation or employment service programs; and (6) analysis of emerging and important issues affecting the employment of people with disabilities.

Rehabilitation Research and Training Center on Drugs and Disability

Wright State University
School of Medicine
Substance Abuse Resources and Disability Issues (SARDI)
P.O. Box 927
Dayton, OH 45401-0927
sardi@wright.edu
http://www.med.wright.edu/SOM/SARDI

Principal Investigator: Dennis C. Moore, EdD
Public Contact: Jo Ann Ford, MRC, CCDC III, 937/259-1384 (V/TTY); Fax: 937/259-1395

Project Number: H133B70018
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 97 $499,369; FY 98 $602,294; FY 99 $602,294
Abstract: This project conducts epidemiological and evaluative studies of substance abuse and substance abuse services for consumers of state vocational rehabilitation (VR) programs. Activities address substance abuse as it co-exists with other disabilities; all components of the RRTC are designed to interrelate and synergistically build on each other. The research components include longitudinal and multisite studies to address more advanced research questions, and quantitative/qualitative methods to investigate vocational rehabilitation issues for people with HIV. The training components use a variety of materials, venues, and trainers in order to address needs within pre- and inservice populations. Training and dissemination components also include extensive use of distance learning media, especially use of the Internet to provide professionals and consumers with timely and relevant information. Stakeholder concerns and interests are addressed by several mechanisms, including a formal subcontract with the National Association on Alcohol, Drugs, and Disability. This project is one component of a number of state and federally funded entities in the SARDI (Substance Abuse Resources & Disability Issues) center. Multiple collaborations are delineated with federal agencies, including the Substance Abuse and Mental Health Services Administration, as well as professional and consumer organizations, national clearinghouses, other RRTCs, and institutions of higher education.

The MRI/Penn Training Center on Vocational Rehabilitation Services for Persons with Long-Term Mental Illness

Matrix Research Institute
6008 Wayne Avenue
Philadelphia, PA 19144
workmri@aol.com
http://www.matrixresearch.org

Principal Investigator: Donald J. Dellario, PhD; Irvin D. Rutman, PhD; Trevor Hadley, PhD
Public Contact: Donald J. Dellario, PhD, 215/438-8200 (V); 215/438-1506 (TTY); Fax: 215/438-8337

Project Number: H133B70007
Start Date: June 5, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $500,000; FY 98 $500,000; FY 99 $500,000
Abstract: This RRTC focuses on four research areas: (1) improving the work incentives of the Social Security system, (2) linking client characteristics and program design to client outcomes, (3) exploring employer/employee relationships, and (4) examining vocational rehabilitation's relationship to behavioral managed care systems. It also focuses on four training issues: (1) improving rehabilitation research skills; (2) developing mental health/vocational rehabilitation curricula for human services, social work, and nursing; (3) assessing training methodologies in the field; and (4) expanding online dissemination to the field.

Rehabilitation Research and Training Center on Workplace Supports

Virginia Commonwealth University
Rehabilitation Research and Training Center on Workplace Supports
1314 West Main Street, Box 842011
Richmond, VA 23284-2011
tcblanke@saturn.vcu.edu
http://www.worksupport.com

Principal Investigator: Paul Wehman, PhD
Public Contact: Valerie Brooke, Associate Director, 804/828-1851 (V); 804/828-2494 (TTY); Fax: 804/828-2193

Project Number: H133B980036
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $699,992; FY 99 $699,992
Abstract: This Center helps to increase the national employment rate among people with disabilities by identifying factors in the work environment that inhibit or enhance employment outcomes and by sharing the results with the business community. Researchers: (1) analyze existing or new financial incentives to find those that encourage enterprises to hire or retrain workers with disabilities; (2) measure the effectiveness of disability management and return-to-work strategies; (3) assess employers' need for information, training, and resources; (4) conduct, in business settings, interventions that respond to employer needs; (5) analyze the interventions to determine their effectiveness; (6) determine the impact of changes in work structures such as telecommuting and self-employment on the employment outcomes of people with disabilities. Stakeholders who benefit from these research, training, technical assistance, and dissemination efforts include business personnel; rehabilitation service personnel; federal and state policy makers; people with disabilities; their guardians, advocates, and authorized representatives; students; and the general public.

Rehabilitation Research and Training Center on Community Rehabilitation Programs to Improve Employment Outcomes

University of Wisconsin-Stout
Stout Vocational Rehabilitation Institute
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rtc@uwstout.edu
http://rtc.uwstout.edu

Principal Investigator: Daniel C. McAlees, PhD
Public Contact: 715/232-1389 (V); 715/232-5025 (TTY); Fax: 715/232-2251

Project Number: H133B980040
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: This project engages community-based rehabilitation programs (CRPs) and state rehabilitation programs in an effort to open multiple funding sources for rehabilitation and habilitation services and employment opportunities for people with disabilities. The project includes a series of interrelated studies directed toward changing outcomes and determining CRP capacities to affect economic status of people with disabilities in their communities and develops a complementary methodology for achieving utilization and application of the new knowledge. Primary research tasks: (1) examining how CRPs are serving people with disabilities from alternate sources of funding; (2) determining the extent to which consumers pursue and receive services, compared to the intentions of the Rehabilitation Act; (3) exploring what funding, service, and strategy capacities exist to address those intentions more coherently at the community-level; (4) devising and demonstrating practice-program alternatives that materially improve outcomes from CRPs; and (5) clarifying how CRPs as an industry can be better enjoined as a complementary resource to improve the economic and community integration status of people with disabilities. The project establishes a publicly accessible national database of core information on CRP programs, and includes training, technical assistance, and dissemination activities.

Working It Out Together: Women with Disabilities and Employment

Children's Hospital
Institute for Community Inclusion
300 Longwood Avenue
Boston, MA 02115
foley_s@a1.tch.harvard.edu
http://www.childrenshospital.org/ici

Principal Investigator: Judith Palfrey, MD; Susan Foley, PhD, 617/355-6714 (Palfrey); 617/355-2075 (Foley)
Public Contact: Susan Foley, 617/355-2075; Fax: 617/355-7940

Project Number: H133A990019
Start Date: November 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $199,861

Abstract: This study explores the experience of working women with disabilities to find out what workplace supports have been the most beneficial, what obstacles remain, and how peer support and mentoring fit into the basket of supports. This project provides a national picture of women with disabilities' use of income supports, public services, and employment outcomes. It also provides the perspective of 200 working women with disabilities about what workplace supports have been most beneficial and what needs remain. Findings from these two studies give a snapshot of the critical needs of working women with disabilities. The project also develops mentorship and peer support strategies that can be used by other women with disabilities, service providers, and researchers. These two strategies have the potential to improve the economic status of working women with disabilities.

A Four-Year Research and Demonstration Project to Address Ways to Improve the Employment Practices Covered by Title I of the Americans with Disabilities Act (ADA)

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Principal Investigator: Susanne Bruyère, PhD, 607/255-7727 (V)
Public Contact: Deborah Fisher, 607/255-3079 (V); 607/255-2891 (TTY); Fax: 607/255-2763

Project Number: H133A70005
Start Date: October 1, 1997
Length: 48 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 97 $249,958; FY 98 $249,804; FY 99 $249,804

Abstract: This project investigates how Title I of the ADA affects employment practices of private-sector small, medium, and large businesses, and ways to improve employment practices covered by the ADA. The research identifies employment practices that have challenged implementation of the ADA, and identifies interventions that can be used by private sector employers and people with disabilities to address these practices. The project examines employment policy and practices that enhance both the hiring and retention of workers with disabilities. The Program on Employment and Disability in the School of Industrial and Labor Relations at Cornell University, in collaboration with the Washington Business Group on Health (WBGH), the Lewin Group, and the Society for Human Resource Management, jointly administer the project.

Field-Initiated Projects (FIPs)
Arkansas

Multimedia Job Accommodations Curriculum Project for Persons Who Are Deaf or Hard of Hearing

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Department of Rehabilitation Education and Research
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Principal Investigator: Douglas Watson, PhD
Public Contact: 501/686-9691 (V/TTY); Fax: 501/686-9698

Project Number: H133G70104
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 97 $100,164; FY 98 $122,337; FY 99 $94,013
Abstract: This project meets the needs expressed by consumers, employers, and vocational rehabilitation professionals for increased knowledge about requesting and getting on-the-job accommodations. The project makes accessible and disseminates research-based findings and information already developed in a prototype model that empowers workers who are deaf or hard of hearing to identify and request an appropriate on-the-job accommodation.

Policy Barriers for People with Long Term Mental Illness Who Want to Work

National Rehabilitation Hospital Research Center
Medstar Research Institute
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Principal Investigator: Gerben DeJong, PhD
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Project Number: H133G80031
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $124,996; FY 99 $124,923
Abstract: This project uses the personal experiences of people with long-term mental illness (LTMI) to identify policies and implementation strategies within the public assistance system that either promote work or create barriers to work for this population. The project has the following objectives: (1) to determine whether programs and policies constitute barriers to employment among working and nonworking people with LTMI and how participants in this sample experience the identified barriers; (2) to determine whether and how a small sample of workers with LTMI use existing work incentives and other programs to maintain employment; (3) to determine what perceived policy and programmatic barriers to employment identified in Phase I are present in a larger sample of people with LTMI, and whether they systematically vary by socioeconomic status, gender, race, age, or other socio-demographic characteristics; (4) to provide an in-depth description of the impact of perceived policy and programmatic barriers and options on the employment histories of five workers and five nonworkers with LTMI; and (5) to recommend policies and implementation strategies that promote work among the LTMI population, and to disseminate the information.

Development of an Individualized Marketing Strategy for Job Development for People with Severe Disabilities

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Project Number: H133G80030
Start Date: June 15, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $123,878; FY 99 $124,989

Abstract: This project develops an Individualized Employment Portfolio and a training manual that helps people with severe and multiple disabilities, including physical and communication disabilities, to secure employment. The product increases their functional capability for individualized representation with potential employers, as well as by employment representatives as appropriate. The project surveys and field-tests the materials with employers, and then modifies and finalizes the product.

Field-Initiated Projects (FIPs)
Georgia

Development and Dissemination of a Questionnaire and Method to Evaluate Customer Satisfaction with Rehabilitation

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Principal Investigator: Adele Patrick
Public Contact: Phil Chase, 706/542-1812; Fax: 706/542-4130

Project Number: H133G80023
Start Date: October 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: This project develops a short, uncomplicated consumer satisfaction survey instrument to be administered by rehabilitation programs. Maximizing satisfaction with rehabilitation services should allow more consumers to reach employment and other important goals, and should reduce the number of consumers who drop out. The project: (1) develops an instrument and methodology for the collection of data regarding consumer satisfaction with services provided by the state and federal rehabilitation agencies, and (2) disseminates information about the use of the instrument and analysis of the data provided by the instrument. When instrument development is completed, it is validated by soliciting input from focus groups. Then revisions are made and the instrument is pilot tested. The project produces a survey methodology designed to generate the highest possible response rate in order to assure that the rehabilitation agency is getting an accurate assessment of satisfaction. Ongoing information about the service delivery system should include data regarding satisfaction so that service delivery can be improved and priorities can be managed.

Field Initiated Projects (FIPs)
Illinois

Comparison of Two Employment Models for Consumers with Severe Mental Illness

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Project Number: H133G90155
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $150,000

Abstract: This project conducts a randomized controlled trial comparing supported employment with well-established, comprehensive psychiatric rehabilitation approaches. It also investigates interactions between consumer characteristics and employment approaches, toward an understanding of the best vocational rehabilitation strategies for people of color, especially people from the African American community. This study compares the effectiveness of two important, popular employment models for people with Severe Mental Illness (SMI). The Diversified Placement Approach (DPA) offers a gradual, stepwise preparation for competitive employment, including prevocational training, agency-run business opportunities, group placements, individual placements, and ultimately movement into independent employment, all available on a flexible, individualized basis without fixed time limits. The second model is a supported employment model developed in New Hampshire, known as Individual Placement and Support (IPS). IPS is a supported employment approach for individuals with SMI. As a consumer-oriented approach, key features of the IPS model include individualized planning with careful attention to consumer preferences in the job matching process, close coordination between rehabilitation and treatment, and rapid job search.

The Impact of a Rehabilitation Introduction Group on State Vocational Rehabilitation Outcomes

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Principal Investigator: Thomas P. McCarthy, ScD, CRC
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Project Number: H133G70098
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $83,366; FY 98 $76,069; FY 99 $85,178
Abstract: This study helps people with severe psychiatric disabilities make informed decisions about pursuing vocational rehabilitation and studies the specific cognitive factors that correlate with rehabilitation readiness. A total of 42 subjects participate in Rehabilitation Introduction Groups (RIGs) prior to entry into state vocational rehabilitation (SVR). An 18-month follow-up compares a representative RIG sample to SVR clients who did not participate in the RIGs in order to assess the impact of the RIG on SVR process, outcomes, and measures of readiness.

Exploratory Study of the Relationship Between Sustained Employment and Psychosocial Adjustment of People with Psychiatric Disabilities

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Project Number: H133G80124
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $124,998; FY 99 $125,000

Abstract: This project studies the relationship between successful employment of people with psychiatric disabilities and their overall level of psychosocial adjustment. In this study the concept of psychosocial adjustment is related to the concept of recovery, described as a unique process of changing one's attitudes, values, feelings, goals, skills, and roles. In this way, recovery is conceptualized as the core of the process of psychosocial adjustment, since it involves the internal restructuring of the person and is expected to lead not only to the person's adaptation to the illness but also to a significant improvement and a qualitatively different functioning of the person. From this perspective, this study explores the relationship of sustained competitive employment to consumers' psychosocial functioning. The relationship of consumers' vocational and psychosocial functioning over time is explored as well.

The Self-Employment Experience: Learning About Entrepreneurs with Disabilities to Build Models for Improving Self-Employment Outcomes

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Project Number: H133G70064
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 97 $120,822; FY 98 $124,990; FY 99 $124,492

Abstract: This project examines self-employment experiences of people with disabilities. While self-employment is a growing national trend for people without disabilities, it is generally considered a less-than-optimal outcome for consumers of vocational rehabilitation (VR) services and is seldom pursued. Survey respondents are sampled from two sources. First, state VR agencies with high percentages of self-employment closures are solicited to participate by providing access to consumers they have assisted in starting businesses. Second, the Disabled Businesspersons Association (DBA) is solicited to provide access to members who have achieved self-employment without the assistance of a VR agency. Project goals include: (1) providing a clearer understanding of self-employment for people with disabilities, (2) encouraging development of new policies and procedures, and (3) providing future entrepreneurs with disabilities and support agencies with recommendations for improved practice. Researchers also develop profiles of self-employed individuals with disabilities and recommend changes to VR practices that promote self-employment as a viable service outcome.

Variables Associated with Vocational Success among Persons with Severe Mental Illness: An Empirical Study

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Project Number: H133G990036
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 99 $138,332

Abstract: This project: (1) examines the relationships between several variables and vocational success among people with severe and persistent mental illness, and (2) develops a model of how those variables together lead to vocational success in this population. Many attempts have been made to identify factors associated with vocational success among people with severe mental illness, but no comprehensive portrait of these factors has been developed. The study is carried out at three community-based rehabilitation service agencies in Cleveland Ohio, that provide a range of vocational services to individuals with severe and persistent mental illness. This study uses a longitudinal design with three data collection points to follow approximately 300 individuals receiving vocational training; the variables to be examined are in three areas: personal factors, work environment factors, and other factors. Personal factors include social functioning, symptomatology, symptom management, and expectations to succeed. Work environment factors include the employers' knowledge about mental illness, the work environment, and pay. Other factors include the fit between employee interests and the actual job, and social networks.

Functional Assessment in Rehabilitation Software Conversion (FAIR/SC)

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Principal Investigator: Howard Dansky
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Project Number: H133G80099
Start Date: September 1, 1998
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $124,952; FY 99 $124,904
Abstract: This project develops, field tests, and produces an innovative computer-based software system to improve the effectiveness of employment programs for people with cognitive disabilities. This new software uses new vocational assessment technology developed and tested over a three-year period. The project's objectives: (1) to design a software version of the FAIR assessment model, including conceptual design of the program components and functional analysis of information-processing relationships among the model components; (2) to recruit service providers as partners and conduct user focus groups at field sites, and integrate results of testing several hardware and software configurations; (3) to perform parallel, interrelated activities and continual quality assurance to test for adherence to written specifications; (4) to design refinements and improvements during one year field tests of use by supported employment practitioners and service recipients; (5) to write user documentation; (6) to perform more field tests at various sites; (7) to evaluate effectiveness, review and assimilate user feedback; and (8) to refine, write final user guides and documentation, and publish the application.

Field-Initiated Projects (FIPs)
Pennsylvania

Testing the Effectiveness of School-to-Work Transition Services for Youth with Serious Emotional Disturbances

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Principal Investigator: Laura Blankertz
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Project Number: H133G80084
Start Date: September 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $123,297; FY 99 $124,685

Abstract: This project improves school-to-work transition services by comparing an experimental and a comparison group on a variety of economic and noneconomic outcomes. The project builds upon a pilot initiative, Project YES (Young Adult Employment), which was designed to develop a model for inter-system collaboration in the operation of a school-to-work transition program for youth with serious emotional disturbance. In this project, the Philadelphia Board of Education, the Philadelphia Office of Mental Health and its city-wide network of provider agencies, and the Philadelphia Office of the State Vocational Rehabilitation system, provide interventions through each of three clearly delineated stages: (1) identification and engagement of youth leaving school, (2) implementation of services, and (3) development of individual supports to maintain youth in post-transition activities. The seven economic and noneconomic factors compared include: use of mental health and vocational rehabilitation services, types of employment, length of employment, wages earned, self-esteem, empowerment and community involvement, and criminal activity.

Enhancing Consumer-Counselor Working Relationships in Rehabilitation: An Empirical Research Investigation of Counselor Expectancies and Working Alliance as Variables for Optimizing Consumer-Counselor Relationships, Consumer Satisfaction, and Rehabilitation Outcomes

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Principal Investigator: Brian McMahon, PhD
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Project Number: H133G80135
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $124,444; FY 99 $124,767
Abstract: This project brings the concept of "consumer involvement" to a place beyond the level of good intentions, rhetoric, platitude, and legal mandate; it provides practical tools with which relevant constructs can be measured and changed to build meaningful partnerships. Maximizing the involvement of consumers in the vocational rehabilitation (VR) process in a meaningful manner can be accomplished if the working alliance between counselor and consumer is strengthened in a direct and measurable way. The target audience includes clients with severe disabilities of the state-federal VR program and the counselors who are employed to provide them with services.

Small Business Innovative Research (SBIR Phase I)
California

Disabled Teen E-Zine

Disability Central
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Principal Investigator: Linda Stein, PhD
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Project Number: ED-99-PO-4704
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000

Abstract: This project offers job development, job opportunities, and transition from school to work by creating and developing an Internet-based magazine (an e-zine) for teens with disabilities. The target population of this magazine is teenagers with disabilities from the ages of 14 to 19. They determine the content and themes of the e-zine. In addition, they are responsible for interfacing with Interact Studios to develop a fully accessible e-zine. Marketing and sales staff seek out and secure advertisers for the e-zine, thereby ensuring their salaries and continued publication. A project manager is available to consult with the staff to assist them in determining appropriate layout, timely articles, and interesting columns. This e-zine enables teens with disabilities to develop an online community to offer support, education, and entertainment to one another. Teens gain job experience and can continue this job in the future if they so choose and if revenues allow.

Small Business Innovative Research (SBIR Phase I)
Illinois

ICPPS: The Individualized Career Planning and Preparation System

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Principal Investigator: Phillip J. Vitkus
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Project Number: ED-99-PO-4642
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,614

Abstract: This project assesses the feasibility of adapting an existing Web-based project management tool to facilitate accurate, timely communications among multiple agencies responsible for providing career planning and preparation services to students with disabilities. The project includes examining the possibility of creating an integrated reference model that at a high level matches possible service providers and vocational opportunities to a student's vocational aptitudes, abilities, service needs, and preferences. If this is feasible, then it would be possible to create a very efficient computer-based action plan that enables all of those associated with the student with a disability, including parents, guardians, case managers, advocates, teachers, job coaches, and placement counselors, to identify decisions to make and actions to take at each legal and educational milestone in the student's life. Such a system would lead to optimal utilization of educational opportunities and to an optimal transition from educational to adult environments.

Health and Function

NIDRR's research focus for health and function addresses problems in individual care, services, and supports for people with disabilities. Research topics include: medical rehabilitation; health and wellness programs; service delivery; short and long-term interventions; systems research; and new and emerging disabilities.

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Rehabilitation Research and Training Center on Secondary Conditions of Spinal Cord Injury: Promoting General Health, Well-Being, and Community Integration Through Home-Based, Self-Directed Care

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http://main.uab.edu/show.asp?durki=8762
http://www.spinalcord.uab.edu

Principal Investigator: Amie B. Jackson, MD, 205/934-3334 (V); 205/934-3330 (V); 205/934-4642 (TTY)
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Project Number: H133B980016
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 98 $799,993; FY 99 $799,998

Abstract: This RRTC conducts coordinated, integrated, and advanced research in the prevention and treatment of secondary conditions of Spinal Cord Injury (SCI). The eight interrelated projects include: (1) determine the effectiveness of cranberry pills to prevent and treat urinary tract infections (UTIs); (2) evaluate interventions used to prevent and treat UTIs in people with SCI using the University of Alabama/Birmingham SCI Urologic Database; (3) study the relationship of beverage consumption and water hardness to the risk of urinary tract stones; (4) address pain following SCI by evaluating SCI pain classification systems, studying the effectiveness of gabapentine and methadone in relieving certain types of pain, and developing a method to target those at risk; (5) determine the duration of immune response to pneumococcal vaccine and the need for revaccination; (6) evaluate a screening tool to identify people with SCI at high risk for sleep apnea, and evaluate treatments to improve their health and quality of life; (7) study the use of telemedicine to reduce depression and secondary conditions among people with SCI and their caregivers through problem solving interventions; and (8) evaluate and adapt a nationally recognized weight-loss project for a population of people with SCI. A collaborative project with another Center evaluates a computer-based risk assessment and feedback tool for assessing secondary conditions. This RRTC provides training on research methodology and information based on research activities to people with disabilities, their families, service providers, and rehabilitation professionals. Information is disseminated through print media (information sheets and newsletters), electronically (through the Internet and a fax information service), and through technical assistance.

Rehabilitation Research and Training Center in Neuromuscular Diseases

University of California/Davis
MED: Physical Medicine and Rehabilitation
TB 191
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Principal Investigator: Craig McDonald, MD
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Project Number: H133B980008
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $650,000; FY 99 $650,000
Abstract: This project conducts research designed to enhance the quality of life of people with neuromuscular diseases. Through multidisciplinary research and a comprehensive program of training and information services, the Center serves consumers, physicians, and health care workers. Program areas include: Interventions to preserve functional capacity including management of weakness and respiratory insufficiency due to muscle wasting, exercise interventions, treatment of exercise related fatigue, pain interventions, lower limb orthotic interventions, and dietary interventions; interventions to enhance community integration, including incorporating goal-based approaches to community integration, facilitation of healthy adaptation through development of stress management and coping skills, and resource training for acquisition of disability-related information through the Internet; genetic testing, information, and research; and training and information services.

Rehabilitation Research and Training Centers (RRTCs)
California

Aging with Spinal Cord Injury (SCI)

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Los Amigos National Rehabilitation Center
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Principal Investigator: Bryan J. Kemp, PhD; Robert L. Waters, MD
Public Contact: Lilli Thompson, PT, Training Director, 562/401-7402; Fax: 562/401-7011

Project Number: H133B70011
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $650,000; FY 98 $650,000; FY 99 $650,000
Abstract: The Rehabilitation Research and Training Center (RRTC) on Aging with Spinal Cord Injury (SCI) is devoted to understanding the unique problems people with spinal cord injury experience as they age. Topics of research include: the natural course of aging with SCI, cardiovascular disease (CVD) and risk factors of CVD, pulmonary aspects of aging with SCI, bone loss, functional changes associated with age and duration of SCI, maintaining employment, treatment of depression, and informal and formal care systems for people aging with SCI. The RRTC has several goals for education, training, dissemination, and utilization: (1) to train current and future health, allied health, and rehabilitation professionals about aging with SCI; (2) to train and develop rehabilitation research professionals in the area of aging with SCI; (3) to improve adoption and use of RRTC-developed knowledge and treatment regimens by health and rehabilitation professionals; (4) to disseminate information about aging with SCI to people with SCI and their families; and (5) to train graduate students and medical students in advanced knowledge and techniques from studies about aging with SCI. Training and dissemination occurs through advanced and continuing education courses, local and national conferences, workshops, publications in professional and consumer oriented journals, and the Internet.

Rehabilitation Research and Training Center on Aging with a Disability

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Project Number: H133B980024
Start Date: September 1, 1998
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: This project assists people who are aging with a disability by conducting a series of research studies using a database of over 1,000 people who represent a variety of disabilities (for example, cerebral palsy, rheumatoid arthritis, stroke, spinal cord injury, polio). Research projects include: (1) the natural course of aging with a disability; (2) assisting family caregivers of people aging with a disability; (3) improving community integration and adjustment; (4) preventing secondary complications such as diabetes and thyroid disorders; (5) improving bone density through a regimen of exercise and vitamins; and (6) understanding the role of assistive technology (AT) and environmental interventions (EI) in maintaining functional performance. Training, dissemination, and technical assistance activities focus on students and professionals in the health, allied heath, and rehabilitation fields, as well as people aging with a disability and their families. Goals include training rehabilitation researchers knowledgeable about aging with a disability, improving the adoption and utilization of RRTC-developed assessment and treatment regimens by health and rehabilitation professionals, and disseminating information about aging with a disability to people with disabilities and their families. Training and dissemination occurs through advanced and continuing education courses, local, national, and international conferences, workshops, publications in professional and consumer oriented journals, and the Internet.

Managed Health Care for Individuals with Disabilities

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National Rehabilitation Hospital Research Center
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Principal Investigator: Gerben DeJong, PhD
Public Contact: Olga Elizabeth Hayes, 202/466-1919; Fax: 202/466-1911

Project Number: H133B70003
Start Date: May 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $499,969; FY 98 $499,988; FY 99 $500,000
Abstract: This project provides national leadership on the major health service and health policy issues facing consumers with disabilities in managed health care arrangements. It: (1) conducts research; (2) prepares special policy analyses; (3) hosts forums for discussion; (4) presents expert testimony to Congress and governmental agencies; (5) publishes in the health policy, consumer, and trade literature; (6) trains graduate students with disabilities in health service research; and (7) disseminates findings to diverse consumer, provider, payer, academic, and policy-making audiences. On the state and national levels the project seeks to make managed care and the larger health care system more responsive to the needs of people with disabilities by acting as a catalyst for the development of new ideas. Program partners are the National Rehabilitation Hospital Research Center (NRH-RC) in Washington DC and the Independent Living Research Utilization (ILRU) center in Houston Texas.

National Research and Training Center on Psychiatric Disability

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Project Number: H133B50004
Start Date: September 30, 1995
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 95 $400,000; FY 96 $400,000; FY 97 $400,000; FY 98 $400,000; FY 99 $400,000
Other funding: FY 95 $145,000 (Source: Center for Mental Health Services); FY 97 $145,000 (CMHS); FY 99 $145,000 (CMHS)
Abstract: The Center conducts basic evaluation and research, and trains rehabilitation, education, and mental health service providers, consumers, and families, in seven major areas: (1) peer support, (2) vocational rehabilitation, (3) transition-age youth with mental illness, (4) consumer service delivery, (5) familial experiences, (6) minority issues, and (7) women's issues. The staff also provides information for public policy initiatives.

Rehabilitation Research and Training Center on Aging with Mental Retardation

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Project Number: H133B980046
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $699,934; FY 99 $699,987
Abstract: This project promotes the independence, productivity, community inclusion, full citizenship, and self-determination of older adults with mental retardation through a coordinated program of research, training, technical assistance, and dissemination activities. The research program aims to increase knowledge about the changing needs of older adults with mental retardation and their families as they age, and to increase the effectiveness of innovative approaches, public policies, and program interventions that provide needed supports and that promote the successful aging of these adults and their families. It examines how age-related changes in physical and psychological health affect the ability to function in the community, including home, work, and leisure settings. The research program also identifies best practices and current public policies that support these adults and their families. The primary goal is to translate the knowledge gained into practice through broad-based training, technical assistance, and dissemination to people with mental retardation, their families, service providers, administrators and policy makers, advocacy groups, and the general community. Dissemination vehicles include the Center's Clearinghouse, Web page, and newsletters.

Rehabilitation Research and Training Center on Stroke Rehabilitation

Rehabilitation Institute Research Corporation
345 East Superior Street
Chicago, IL 60611

Principal Investigator: Elliot J. Roth, MD, 312/238-4637
Public Contact: Linda Lovell, Project Coordinator, 312/238-6197; Fax: 312/238-6998

Project Number: H133B980021
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $800,000; FY 99 $800,000
Abstract: This project tests the effectiveness of several stroke rehabilitation strategies and tactics, trains stroke survivors and professionals, and disseminates knowledge relevant to stroke care. In order to extend the knowledge base of stroke rehabilitation, produce changes in clinical practice, and enhance the quality of life of stroke survivors and their families, the Center: (1) identifies, develops, and evaluates rehabilitation techniques in order to address coexisting and secondary conditions and improve outcomes for all stroke patients; (2) develops and evaluates standard aerobic exercise protocols; (3) identifies and evaluates methods to identify and treat depression and other psychological problems associated with stroke; (4) determines the effectiveness of stroke prevention education provided in a medical rehabilitation setting; (5) evaluates the impact of changes in diagnosis and medical treatment of stroke on rehabilitation needs; (6) evaluates long-range outcomes for stroke rehabilitation across different treatment settings; (7) evaluates the impact of stroke practice guidelines on delivery and outcomes of rehabilitation services; (8) provides training on new approaches, innovations, and the specialized principles and practices of rehabilitation care of individuals with stoke; (9) provides applied research experience and training in research principles and methods; (10) disseminates information of new developments in the area of stroke care and research to people with stroke and their families, rehabilitation professionals, and service providers; and (11) conducts a state-of-the-science conference. The Center has a large database of information regarding stroke rehabilitation patients and continues ongoing systems and activities to collect and analyze data concerning stroke impairment, disability, and social functioning.

Rehabilitation Research and Training Center on Rehabilitation and Childhood Trauma

New England Medical Center
750 Washington Street, 75K-R
Boston, MA 02111
http://www.nemc.org/rehab/homepg.htm

Principal Investigator: Carla DiScala, PhD, 617/636-5037 (V)
Public Contact: Vincent Licenziato, Staff Assistant, 617/636-5031 (V/TTY); Fax: 617/636-5513

Project Number: H133B50006
Start Date: August 1, 1993
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 93 $499,631; FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $250,000; FY 99 (No-cost extension through 12/31/99)
Other funding: FY 99 $100,000 (Source: Maternal and Child Health Bureau-HRSA) and $50,000 (New England Medical Center)
Abstract: This RRTC focuses on pediatric trauma in the areas of research, education, and training of professionals and consumers. Activities are divided into three areas: (1) maintenance of the National Pediatric Trauma Registry (NPTR); (2) dissemination of the NPTR results to professionals and consumers; and (3) training. Dissemination of the NPTR focuses on injuries to children with special care needs, severe injuries such as those resulting in spinal cord damage and those caused by child abuse, trends in sports-related injuries, trends in access to rehabilitation services, the relationship between medical insurance and medical care received, and the effectiveness of cardiopulmonary resuscitation in extremely severe injuries. Training activities include presenting the NPTR data in workshops for health care professionals who serve children, creating new fact sheets, publishing the *REHAB Update* newsletter, continuing outreach and dissemination via the RRTC Web site, creating new tip cards (children injured through peer violence and bullying at school that involves children with disabilities), and making subsets of the NPTR data available to train graduate students in injury control at the Johns Hopkins Center for Injury Research and Policy and the Harvard Injury Control Research Center.

Missouri Arthritis Rehabilitation Research and Training Center (MARRTC)

University of Missouri/Columbia
Arthritis Grants Office
DC330.00
One Hospital Drive
Columbia, MO 65212
bakerv@health.missouri.edu
http://www.hsc.missouri.edu/arthritis
http://www.hsc.missouri.edu/fibro

Principal Investigator: Jerry C. Parker, PhD, 573/814-6480
Public Contact: Valerie Baker, 573/884-1499; Fax: 573/884-3020

Project Number: H133B980022
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 98 $800,000; FY 99 $800,000
Abstract: MARRTC helps to prevent and manage disability in people with arthritis and related musculoskeletal disease by providing leadership at the national level, through three strategies: (1) MARRTC conducts state-of-the-art rehabilitation and health services research that addresses the needs of people with arthritis and related musculoskeletal diseases in the following areas: exercise and fitness, interventions for psychological well-being and pain, job accommodations and employment, and health and wellness, using participatory action research (PAR) strategies to emphasize the inclusion of consumers in all phases of the research process; (2) MARRTC provides training for physicians and other health care professionals in the rehabilitative aspects of rheumatologic practice, including university-based programs, national presentations, research capacity-building, and publications aimed at improving clinical skills; and (3) MARRTC disseminates rehabilitation research and technology transfer for the empowerment of people with arthritis to help them to minimize disability, maintain employment, and improve functional status.

Rehabilitation Research and Training Center on Health and Wellness for Persons with Long-Term Disabilities

Oregon Health Sciences University
Oregon Institute on Disability and Development
Child Development and Rehabilitation Center
707 Southwest Gaines
P.O. Box 574
Portland, OR 97207-0574

Principal Investigator: Gloria Krahn, PhD, MPH, 503/494-8364
Public Contact: Susan Maley, Project Coordinator, 503/494-7930; Fax: 503/494-6868

Project Number: H133B990019
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $700,000
Abstract: The Center has a comprehensive program of research, training, technical assistance, and dissemination with primary attention given to the physical and mental aspects of health for people with long-lasting disabilities such as cerebral palsy, spinal cord injury, multiple sclerosis, amputation, and post-polio. Interconnected research areas include evaluating health assessment definitions, practices, policies, and measurement, and their impact on health promotion; and investigating the relationship between selected health maintenance strategies and the incidence and severity of secondary conditions and other functional outcomes. Center projects examine the practices of exemplary generic and specialized health promotion programs; analyze the health behaviors and related functional outcomes of individuals with disabilities; examine the relationship between health definitions, practices, and secondary conditions to develop a screening tool for health and wellness for people with disabilities; and investigate the association between disability and differential detection of cancer. The Center's third area of focus centers on identifying and evaluating best practices in health promotion. These include an Internet-delivered reproductive health promotion package, strategies for enhancing the participation of individuals with disabilities in self-directed physical activity, the accessibility of alcohol and drug treatment programs to people with disabilities, and methods for culturally responsive health promotion. An additional research focus is the use and efficacy of complimentary alternative medicine among people with these specific long term disabilities.

Rehabilitation Research and Training Center on Rehabilitation Interventions Following Traumatic Brain Injury

The Institute for Rehabilitation and Research (TIRR)
Brain Injury Research Center
1333 Moursund Avenue
Houston, TX 77030-3498
whigh@bcm.tmc.edu

Principal Investigator: Walter M. High Jr., PhD
Public Contact: 713/666-9550; Fax: 713/668-5210

Project Number: H133B990014
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $650,000
Abstract: The Center promotes the scientific advancement of rehabilitation research by focusing on several areas identified as needing further research. These include areas of weakness in the current knowledge and future research regarding traumatic brain injury (TBI) recovery and rehabilitation effectiveness: (1) improvement of the diagnosis and treatment of persons with mild TBI; (2) development of interventions to assist school-age children with TBI; (3) the needs of minority groups members with TBI; (4) evaluation of the effectiveness of rehabilitation interventions; and (5) treatment for the family members of people with TBI. Activities include an informational and technical assistance resource for consumers and professionals; training for medical and neuropsychological fellows in rehabilitation research; a state-of-the-science conference on mild TBI; and an educational videotape to train family members in effective coping skills. Through representation on the advisory committees, consumers are involved in all aspects of planning and evaluating research and training activities.

Multiple Sclerosis Rehabilitation Research and Training Center

University of Washington
Department of Rehabilitation Medicine
Box 356490
Seattle, WA 98195-6490
dollar@u.washington.edu; eos@u.washington.edu
http://depts.washington.edu/rehab/

Principal Investigator: George H. Kraft, MD, 206/543-7272
Public Contact: Ed O'Shaughnessy, Research Program Administrator, 206/221-5688; Fax: 206/685-3244

Project Number: H133B980017
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $691,314; FY 99 $697,978
Abstract: This Center promotes health and wellness of people with Multiple Sclerosis (MS) and improves their functioning and employment status. Fundamental to the project is a health survey administered to people with MS throughout the Northwest region. Information from the survey is fed into six project components: (1) promoting wellness among people with MS through brief counseling methods; (2) improving the functioning of people with MS through three studies: improving psychological distress using pharmacological intervention, evaluating the combined effect of cooling and exercise on performance, and improving function through cognitive rehabilitation interventions; (3) exploring the employment status of people with MS; (4) designing practical interventions and workplace modifications; (5) studying the interaction between aging and MS; and (6) exploring the effects of gender, culture, socio-economic status, ethnicity, place of residence, and insurance coverage on people with MS, in regard to symptomology and response to treatments. Researchers develop and apply interventions and conduct follow-up surveys to evaluate the effectiveness of the intervention strategies. This Center collaborates with the RRTC on Substance Abuse, the Consortium of MS Centers, the National MS Society, and the MS Association of America.

Exercise and Recreation for Individuals with a Disability: Assessment and Intervention

Rehabilitation Institute of Chicago
Center for Health and Fitness
710 North Lake Shore Drive, Third Floor
Chicago, IL 60611
ricsport@megsinet.net
http://richealthfit.org/resrched/nidrr.htm

Principal Investigator: Jeffery Jones
Public Contact: 312/908-4292; Fax: 312/908-1051

Project Number: H133A60032
Start Date: November 1, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $175,000; FY 97 $175,000; FY 98 $175,000; FY 99 (No-cost extension through 8/31/00)

Abstract: This project demonstrates that participation in exercise and physical activity improves function, facilitates community reintegration, and enhances the quality of life of people with disabilities. The project: (1) investigates the long-term effects of an exercise fitness program on the physiology, metabolic performance, and quality of life of people with spinal cord injury, stroke, and cerebral palsy; (2) examines the role of self-efficacy in maintaining participation in an exercise fitness program; (3) describes the types and frequency of recreation and fitness activities among people who have had a stroke, people with spinal cord injury, and people with cerebral palsy; (4) examines the relationships between participation in recreation and exercise programs and health status, life satisfaction, and depression in the above populations; and (5) delineates barriers and deterrents to participation in recreation and exercise programs that exist for a variety of disability groups.

Access to Health Care Services for Persons with Disabilities: Defining the Barriers and Strategies for Change

Medicaid Working Group
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Boston, MA 02210
drainoni@bu.edu

Principal Investigator: Mari-Lynn Drainoni, PhD
Public Contact: 617/426-4447; Fax: 617/426-4547

Project Number: H133A990014
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $245,434

Abstract: This project examines a wide range of access barriers to the continuum of health care services for people with disabilities across the life span in Massachusetts. The objectives of the research project are: (1) to examine variation in access to health care services by provider type; (2) to examine different types of access important for people with disabilities: physical access, communication access, cognitive access, and medical access; (3) to identify changes made since the passage of the ADA; (4) to identify barriers to health care services as experienced by individuals with disabilities and compare this experience with provider perceptions; (5) to identify best practices that mitigate access barriers; (6) to develop a research agenda for future activities in this area; (7) and to develop dissemination products that advance both knowledge and practice among purchasers, regulators, health plans, providers, and people with disabilities. The project examines the accessibility of a range of health care providers, including outpatient clinics, hospital outpatient departments, mental health and substance abuse treatment providers, dentists' offices, hospitals, rehabilitation facilities, acute detoxification facilities, and assisted living facilities.

Collaborative Study of Impaired Self-Awareness After Traumatic Brain Injury

Mississippi Methodist Rehabilitation Center
Brain Injury Program
1350 East Woodrow Wilson Center
Jackson, MS 39216
marks@mmrcrehab.org
http://www.mmrcrehab.org

Principal Investigator: Mark Sherer, PhD
Public Contact: 601/364-3490; Fax: 601/364-3305

Project Number: H133A980067
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 98 $140,108; FY 99 $140,108
Abstract: This project creates new knowledge on impaired self-awareness (ISA) in people with moderate to severe traumatic brain injury (TBI). ISA interferes with effective delivery of rehabilitation services, prevents self-advocacy, leads to distress within the family system, and negatively affects social outcomes. This project studies its impacts and its subjective meaning for consumers in order to design new treatments and service delivery innovations. It conducts the first large-scale (N=160), prospective longitudinal study of ISA's neural substrates, neuropsychological features, natural history, and relationship to functional and quality-of-life outcomes over the first year following moderate-to-severe TBI. With several methodological innovations that improve interpretation of the quantitative data, project researchers provide the first systematic qualitative study of self-awareness from the perspective of people with TBI and their families. The project uses: (1) the expertise of researchers involved in TBI outcomes research; (2) many data elements already captured in the Model System database and supported by Model System infrastructure; and (3) the high volume of subjects and excellence of resources jointly available at the two collaborating sites. The project is a collaboration between the TBI Model System of Mississippi and the TBI Model System at MossRehab in Philadelphia. Findings are disseminated to consumers, rehabilitation professionals, and the TBI Model Systems nationwide.

A Double-Blind, Placebo-Controlled Trial Exploring the Efficacy of Nortriptyline and Amantadine in the Management of Post-Traumatic Agitation

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Columbus, OH 43210
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Principal Investigator: W. Jerry Mysiw, MD
Public Contact: 614/293-3801; Fax: 614/293-3809

Project Number: H133A980056
Start Date: November 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $269,000; FY 99 $265,435

Abstract: This study provides objective data for evidence-based evaluation and treatment of the most common behavioral impediment to acute rehabilitation, post-traumatic agitation. Post-traumatic agitation is a dramatic behavioral consequence of traumatic brain injury (TBI) occurring in approximately 33 percent of coma-emerging patients. The agitated brain injury survivor has diminished capacity to tolerate or respond to traditional rehabilitation services. At risk for injury and disruptive to the therapeutic milieu, these patients consume considerable health care resources. Pharmacologic intervention is becoming increasingly important in the care of post-traumatic agitation in an effort to resolve the aberrant behavior promptly and permit the patient to respond to an expanded range of rehabilitation services. This project offers a unique opportunity to develop the multicenter trial needed to recruit a statistically meaningful cohort for study. The project involves a randomized, double-blind, placebo-controlled study of two medications commonly used to treat agitation. The study has specifically chosen measures of treatment efficacy with demonstrated validity in this population. The study is done in collaboration with four Model System Centers: Institute for Rehabilitation and Research (TIRR), MossRehab, Santa Clara Valley Medical Center, and the Rehabilitation Institute of Michigan (RIM).

Reducing Risk Factors for Abuse Among Low-Income Minority Women with Disabilities

Baylor College of Medicine
Department of Physical Medicine and Rehabilitation
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Principal Investigator: Margaret A. Nosek, PhD
Public Contact: Carol Howland, 713/960-0505; Fax: 713/961-3555

Project Number: H133A60045
Start Date: September 30, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $250,000; FY 97 $250,000; FY 98 $250,000; FY 99 $250,000
Abstract: This project pursues strategies to reach women with disabilities at all stages of resolving abusive situations. To accomplish this purpose, the project has the following objectives: (1) identify risk factors for emotional, physical, and sexual abuse faced by women with disabilities; (2) assess the ability of rehabilitation and independent living counselors to identify women in abusive situations and refer them to appropriate community resources; (3) develop and test models for programs that reduce the risk of abuse for women with disabilities, particularly among women with disabilities from low-income, minority backgrounds where the incidence of abuse is highest; and (4) establish an agenda for future research on women with disabilities using a national advisory panel. The project works not only with programs that help battered women, but also with those in contact with women with disabilities in various community contexts.

Impact of Family Environment on Patient and Family Outcome After TBI: A Multi-Center Study

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Brain Injury Research Center
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Houston, TX 77025
asander@bcm.tmc.edu

Principal Investigator: Angelle M. Sander, PhD
Public Contact: 713/666-9550; Fax: 713/668-5210

Project Number: H133A980058
Start Date: November 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $224,989; FY 99 $210,239
Abstract: This study determines the importance of the preinjury family environment in the prediction of long-term patient and family outcome after traumatic brain injury (TBI). The research develops models that can be used to identify family members and patients who are at risk for developing long-term adjustment problems. Information gained is also used to develop and pilot a structured family intervention. Previous research has shown that TBI results in substantial distress for a majority of family members. Research conducted with parents of children with TBI indicates that preinjury family functioning has an impact on children's outcome. Similar studies have not been conducted with the population of adults with TBI. In this project data is collected at three Model System Centers: The Institute for Rehabilitation and Research (TIRR), Mississippi Methodist Rehabilitation Center (MMRC), and the Mayo Medical Center (MAYO); data collection is integrated with the current Model Systems Research Protocol. Systematic dissemination activities are designed to target consumers (people with TBI and their families) and rehabilitation professionals.

Effects of Methylphenidate on Working Memory and Cerebral Glucose Metabolism in Persons with Severe Traumatic Brain Injury

Baylor College of Medicine
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Houston, TX 77030
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Principal Investigator: Harvey S. Levin, PhD
Public Contact: 713/798-4860; Fax: 713/798-1456

Project Number: H133A980073
Start Date: December 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $279,903; FY 99 $274,319
Abstract: This project conducts a multicenter clinical trial of methylphenidate (MPH) to treat deficits in working memory and other cognitive impairments resulting from severe traumatic brain injury (TBI). MPH is a potentially cost-effective intervention that could mitigate frequent and disabling cognitive impairments and thereby improve the lives of people with TBI, their families, and caregivers. By using functional brain imaging to identify the mechanism through which MPH improves cognitive functioning, the project seeks direction for developing pharmacologic interventions for people with TBI. A total of 144 people with severe TBI are recruited at three TBI Model Systems Centers (including The Institute for Rehabilitation and Research, Houston, Texas, and the Department of Rehabilitative Medicine, University of Washington, Seattle, Washington). All are to have a working memory deficit on one or both screening tests and no medical contraindications for MPH treatment. They are randomized to 3 conditions; randomization is stratified by center and recovery phase. Working memory, long-term memory, processing speed, everyday memory, and productivity in performing adaptive activities, are assessed at pretreatment baseline. Subsets of participants also undergo positron emission tomographic scanning to evaluate changes in cerebral glucose metabolism. Results are disseminated through publications, presentations, and Internet media to NIDRR Model Systems network investigators, other researchers, rehabilitation providers, family members, and payors.

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Model System for Burn Injury Rehabilitation

University of Colorado Health Sciences Center
School of Medicine
Department of Preventive Medicine and Biometrics
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Denver, CO 80262
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Principal Investigator: Dennis C. Lezotte, PhD, 303/315-6873
Public Contact: Rebecca Sloan, Database Administrator, 303/315-0320; Fax: 303/315-3183

Project Number: H133A980055
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: The Burn Model System/Data Coordinating Center (BMS/DCC) works for and regularly communicates with all clinical BMS principal investigators and their staff to provide the necessary technical, data management, research, and data analysis support for evaluating burn care and rehabilitation outcomes. The DCC and all sites periodically assess specific data elements and operational definitions to become part of a common data dictionary that supports broad-based health services and resource utilization research. The activities of the DCC include developing strategies for establishing and deploying methods to: (1) ensure standard data collection over time; (2) retrieve and integrate each clinical center's common dataset into a combined database; (3) perform essential quality control checks and distribute site-specific error reports; (4) compile and distribute annual program summaries; (5) perform and monitor statistical analyses required of the combined database; (6) assist in the design and support of special ad-hoc research projects; and (7) assist in the dissemination of summary and scientific reports addressing the utility and effectiveness of Burn Model System clinical and rehabilitation strategies.

Johns Hopkins University Burn Injury Rehabilitation Model System

Baltimore Regional Burn Center
Johns Hopkins Bayview Medical Center
4940 Eastern Avenue
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http://www.jhbmc.jhu.edu/brbc/birms

Principal Investigator: James A. Fauerbach, PhD; Barbara J. deLateur, PhD, 410/550-0894 (Fauerbach); 410/532-4717 (deLateur)
Public Contact: Amy Bryant, 410/550-7812; Fax: 410/550-1165 (Fauerbach); 410/532-4719 (deLateur)

Project Number: H133A70025
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $294,375; FY 98 $294,375; FY 99 $294,375
Abstract: This project provides a systemized protocol for the care of pediatric and adult patients with severe burn injuries through a comprehensive and integrated program of research. The protocol is expected to serve as a platform for an accessible and compatible database containing all relevant data. The project validates and develops normative data for several measures related to physical, psychosocial, and vocational outcomes (self-selected walking speed task, hand function test, adjustment to disfigurement, generic and burn-specific quality-of-life tests). Additionally, the project conducts studies evaluating innovative methods of reducing functional impairment due to secondary complications, such as cross-joint contractures, deconditioning, post-trauma distress, disfigurement-related distress, and enhancing vocational quality of life and educational outcomes, including a vocational rehabilitation intervention and a school-based rehabilitation intervention. Experts provide training to generalist health care professionals serving burn survivors in remote and rural regions. Finally, researchers conduct collaborative studies with the University of Washington Model System and the New York Hospital Center/Cornell University.

Model System for Burn Injury Rehabilitation

University of Texas
Southwestern Medical Center
Medical and Rehabilitation Department
5323 Hines Boulevard
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rholav@mednet.swmed.edu
http://www.swmed.edu/ntbrms/welcome.htm

Principal Investigator: Phala Helm, MD, 214/648-2288
Public Contact: Radha Holavanahalli, 214/648-9540; 214/648-3654; Fax: 214/648-2205

Project Number: H133A70023
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000; FY 99 $295,000
Abstract: This multidisciplinary, comprehensive, and coordinated system conducts emergency, medical/surgical, rehabilitation, psychosocial, and vocational activities. To address the goal of prevention of secondary complications, the project conducts two site-specific studies: (1) comparing use of sustained stretching with and without paraffin; and (2) comparing serial splinting with serial casting. To develop and evaluate rural outreach programs, the project has established two quarterly clinics in rural areas of northeast Texas, and plans to initiate a third clinic in Fort Worth Texas. Also, two collaborative research projects develop and evaluate functional outcome measures: (1) development and validation of a new physical functional outcome tool; and (2) assessment of the SF-36 as a measure of community integration and quality of life. The project provides medical rehabilitation and psychosocial interventions for people with burn injury, including children. Interventions are evaluated by addressing several research questions. Also, children are evaluated by addressing outcomes that may vary as a function of the services they received or the compliance of their families with treatment.

Pediatric Burn Injury Rehabilitation Model System

University of Texas Medical Branch
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Galveston, TX 77555
dherndon@email.utmb.edu

Principal Investigator: David Herndon, MD
Public Contact: 409/770-6731; Fax: 409/770-6919

Project Number: H133A70019
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000; FY 99 $295,000
Abstract: This project builds and analyzes a database of information on children and burns, including measures of cardiopulmonary function, physical growth and maturation, bone density, range of motion, activities of daily living, scar formation, reconstructive needs, and measures of psychosocial adjustment. Analysis determines areas that require improvement and measures of functional outcome that can be used in the evaluation of treatment methods. Additionally, the project improves outcomes by instituting and evaluating two modifications to current rehabilitation for children with large severe burn injuries. First, an intensive inpatient rehabilitation program includes rigorous active resistance exercise training and daily care directed by the complete medical and psychosocial rehabilitation team. Effectiveness is compared with functional outcomes achieved in traditional home-based programs. Second, the use of chronic growth hormone therapy is evaluated to increase growth, strength, bone density, function, and well-being. The project assesses current methods of treatment that subdue effects of scar formation. The project's Community Resources Training Program operates in conjunction with selected existing outreach clinics and school reintegration programs.

University of Washington Burn Injury Rehabilitation Model System

University of Washington
Harborview Medical Center
325 Ninth Avenue
Box 359796
Seattle, WA 98104
palacpac@u.washington.edu
http://staff.washington.edu/jaycee

Principal Investigator: Loren H. Engrav, MD, 206/731-3209
Public Contact: Dolores Palacpac, 206/731-2866; Fax: 206/731-3656

Project Number: H133A70014
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $295,000; FY 98 $295,000; FY 99 $295,000
Abstract: This model system: (1) identifies and evaluates techniques to prevent secondary complications; (2) develops and evaluates programs that improve follow-up services for rural populations; (3) develops and evaluates measures of functional outcome for burn rehabilitation; and (4) identifies and evaluates interventions, including vocational rehabilitation and special education interventions, to improve psychosocial adjustment, quality of life, community re-integration, education, and employment-related outcomes.

Model Spinal Cord Injury System

University of Alabama/Birmingham
Spain Rehabilitation Center
619 - 19th Street South, SRC 529
Birmingham, AL 35249-7330
lindsey@uab.edu
http://main.uab.edu/show.asp?durki=10712

Principal Investigator: Amie B. Jackson, MD
Public Contact: Linda Lindsey, Media Specialist, 205/934-3330 (V); 205/934-4642 (TTY); Fax: 205/975-4691

Project Number: H133N50009
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. Emphasis is on collaborative clinical research to solve the medical management and acute rehabilitation problems of people with spinal cord injury. A national SCI statistical center has also been established to coordinate data collection.

Model Spinal Cord Injury System

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Los Amigos National Rehabilitation Center
7601 East Imperial Highway, HB117
Downey, CA 90242-4155

Principal Investigator: Robert L. Waters, MD, 562/401-7048
Public Contact: 562/401-7161; Fax: 562/803-5623

Project Number: H133N50020
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. The scope of work emphasizes collaborative clinical research to solve the medical management and acute rehabilitation problems of spinal cord injury. The model system concept has been maintained for continued study of service delivery.

Northern California Model Spinal Cord Injury System

Santa Clara Valley Medical Center (SCVMC)
Medical Staff Corporation
950 South Bascom Avenue, Suite 2011
San Jose, CA 95128
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http://www.tbi-sci.org

Principal Investigator: Peter C. Werner, MD; Tamara Bushnik, PhD, 408/885-2000
Public Contact: Tamara Bushnik, PhD, 408/295-9896, ext. 16; Fax: 408/295-9913

Project Number: H133N50003
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: This project's multidisciplinary system provides comprehensive rehabilitation services to meet consumer needs from point of injury (emergency treatment and transportation) through acute care, rehabilitation (vocational and education preparation), community and job placement, and long-term follow-up. The project is: (1) demonstrating and evaluating the development and application of improved methods and equipment essential to the care, management, and rehabilitation of the SCI patient; (2) demonstrating methods of community outreach and education for individuals with spinal cord injuries in injury prevention, housing, transportation, recreation, employment, and other community activities; and (3) conducting collaborative and site-specific research on spinal cord injury, its consequences and outcomes, and innovative methods of treatment, including national database studies.

Rocky Mountain Regional Spinal Injury System

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http://www.craighospital.org

Principal Investigator: Daniel P. Lammertse, MD, 303/789-8220 (V)
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Project Number: H133N50001
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: This project is a research and demonstration model of a comprehensive service-delivery system from point of injury through intensive and acute medical care, rehabilitation management, and long-term community follow-up. The scope of work emphasizes collaborative clinical research to solve the medical management and acute rehabilitation problems of spinal cord injury. The model system concept has been maintained for continued study of service delivery.

Georgia Regional Model Spinal Cord Injury Care System

Shepherd Center, Inc.
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Principal Investigator: David F. Apple Jr., MD
Public Contact: Lesley M. Hudson, Project Co-Director, 404/350-7591; Fax: 404/355-1826

Project Number: H133N50022
Start Date: September 30, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The Georgia Regional Spinal Cord Injury Care System is part of a 100-bed specialty hospital, Shepherd Center, in Atlanta Georgia. It has been a member of the model system since 1982, and during the current five-year funding period, it is conducting detailed data collection on individuals who meet the inclusion criteria (approximately 100 per year). Data is being shared with the National Spinal Cord Injury Statistical Center at the University of Alabama/Birmingham. The research component of this project is based on a large collaborative effort on gender- and culture-sensitive issues in care delivery. Additionally, a site-specific project on violence-related injuries is under way. Finally, the Georgia system participates in five additional collaborative efforts being directed by other members of the 18-facility system.

Model Spinal Cord Injury System

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Northwestern Memorial Hospital
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Chicago, IL 60611
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Principal Investigator: Paul R. Meyer Jr., MD, MM
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Project Number: H133N50002
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: The Midwest Regional Spinal Cord Injury Care System (MRSCICS) incorporates comprehensive medical-surgical acute spinal cord injury care within Northwestern Memorial Hospital, and a comprehensive rehabilitation and vocational patient care program within the Rehabilitation Institute of Chicago. Both activities fall under the umbrella of Northwestern University. The system's priorities include clinical spinal cord care and academic research through the search for new scientific knowledge effecting improved patient care and enhanced neurological recovery.

Special Projects and Demonstrations for Spinal Cord Injuries

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Principal Investigator: Shanker Nesathurai, MD
Public Contact: Tricia Regan, Administrative Director of Rehabilitation Services, 617/638-7310; Fax: 617/638-7313

Project Number: H133N50014
Start Date: September 15, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $445,271; FY 98 $373,000; FY 99 $373,000
Other funding: FY 96 $46,623 (Sources: Boston University Medical Center Hospital, Boston Violence Prevention Program)
Abstract: This project demonstrates a strong, comprehensive system of care for people with spinal cord injury (SCI), with special emphasis on: (1) an innovative approach to managed and primary care for Medicaid recipients; (2) an ongoing commitment to the urban community within which the New England Regional Spinal Cord Injury System resides; (3) the development of a violence prevention program to assist with the community reintegration of youth with SCI caused by intentional violence; and (4) the education of providers, consumers, vocational counselors, and payers with respect to the practical use of assistive technology.

University of Michigan Model Spinal Cord Injury System

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model.sci@umich.edu
http://www.med.umich.edu/pmr/model_sci

Principal Investigator: Denise G. Tate, PhD; Austin I. Nobunaga, MD, MPH
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Project Number: H133N50012
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: This project demonstrates and evaluates the comprehensive system of lifetime care provided by the University of Michigan Health System for people with spinal cord injury, beginning at the time of injury. The project uses a participatory action research model to address the universe of disability and contemporary issues, with emphasis upon research to improve rehabilitation and community integration outcomes. Improved methods of service and equipment are demonstrated and evaluated through utilization of technology, prediction of outcomes, and family/consumer empowerment. Access to and utilization of services and research information are promoted by collaboration in national studies and by outreach and educational efforts. These efforts target people with spinal cord injury and their families and caregivers, as well as professionals and students of rehabilitation and related fields. In collaboration with five other Model SCI Systems, this project demonstrates and evaluates a model for providing independent living follow-up services to enhance community reintegration. This model builds upon a program the project jointly created in 1986 with the Center for Independent Living in Ann Arbor. Further research activities encompass family function as a predictor of independence, quantitative and qualitative investigation of factors affecting employment, growth curve characteristics of Functional Independence Measure following injury, aging, quality of life, and relationship of neurogenic pain to function. A Lecture Series provides a forum for University of Michigan faculty and staff and guest speakers to present current research results affecting evaluation and treatment of individuals with spinal cord injury.

Southeastern Michigan Spinal Cord Injury System

Rehabilitation Institute of Michigan
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Principal Investigator: Marcel Dijkers, PhD
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Project Number: H133N50006
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The Southeastern Michigan Spinal Cord Injury System is a research and demonstration model of a comprehensive system of spinal cord injury (SCI) care, from point of injury through emergency services, acute medical care at Detroit Receiving Hospital, rehabilitation management at the Rehabilitation Institute of Michigan, and long-term community follow-up. The scope of work includes evaluation of the costs and benefits of this system, contribution to the national database of the SCI model systems, and collaborative and local research to solve medical management and rehabilitation problems.

Missouri Model Spinal Cord Injury System

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hagglundk@health.missouri.edu
http://www.hsc.missouri.edu/~momscis

Principal Investigator: Kristofer Hagglund, PhD, 573/882-6271 (V)
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Project Number: H133N50005
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: This project is a research and demonstration model of a comprehensive, community-based service delivery system for people with spinal cord injury (SCI), from point of injury through community integration. The model emphasizes consumer involvement in all aspects of care and collaboration with local, community-based organizations to facilitate independent living. The scope of work also emphasizes development of innovative health care, rehabilitation, and community outreach delivery systems for women, racial and ethnic minorities, and rural populations. Research focuses on evaluation of the costs and efficiency of the model and its ability to improve quality of life for people with SCI, family, and significant others. Training, dissemination of information, and contribution to the national database of the SCI model systems are integral components of the project.

Northern New Jersey Model Spinal Cord Injury System

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Kessler Institute for Rehabilitation
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Principal Investigator: Joel A. DeLisa, MD
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Project Number: H133N50013
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The Northern New Jersey Model Spinal Cord Injury System demonstrates and evaluates multidisciplinary, comprehensive health care services to meet patient needs beginning with prevention and emergency medical services and extending through intensive care, acute care, and medical rehabilitation, to long-term follow-up, community reintegration, and vocational rehabilitation. The model system incorporates a well-formulated violence prevention program, a comprehensive substance abuse treatment and prevention program, an innovative spiritual counseling program, and a roving symposium program emphasizing independent living. The project emphasizes clinical research, including controlled studies of innovative new programs, to improve the outcomes of spinal cord injury survivors.

Mount Sinai Spinal Cord Injury Model System

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Principal Investigator: Kristjan T. Ragnarsson, MD
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Project Number: H133N50008
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 373,000

Abstract: The Mount Sinai Spinal Cord Injury Model System demonstrates and evaluates interdisciplinary, comprehensive rehabilitation services to meet the needs of individuals with spinal cord injury from point of injury through acute care, rehabilitation (physical, occupational, vocational, psychological, recreational, and vocational therapies), long-term follow-up, and community reintegration. The program emphasizes peer mentoring, advocacy, health promotion/wellness, and education.

Northeast Ohio Regional Spinal Cord Injury System

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Principal Investigator: Patrick Murray, MD
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Project Number: H133N50018
Start Date: September 15, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The objectives of this project relate to three major goals in the field of spinal cord injury care: (1) to develop and study effective new *solutions* to problems, not the problems themselves; (2) to promote consumer-driven change in a fragmented and cumbersome service-delivery system; and (3) to place appropriate emphasis on solving problems that arise during the chronic phase of SCI. Activities of this project: (1) develop and demonstrate a comprehensive system of spinal cord injury care delivery; (2) demonstrate and evaluate creative means by which consumers with disabilities can organize and promote models of service delivery in an environment of managed medical care; (3) develop an innovative method aimed at improving community reintegration outcomes for people who are disadvantaged by minority or economic status; (4) participate fully and effectively in the collaborative data collection research efforts of the Model Regional SCI Care System Program of NIDRR; (5) focus on means by which benefits of provided services can be measured concurrently with an analysis of cost implication of service delivery; and (6) broaden and strengthen educational offerings made available to consumers, service delivery providers, and the general public.

Model Spinal Cord Injury System

Thomas Jefferson University
Jefferson Medical College
11th and Walnut Streets
Philadelphia, PA 19107
http://jeffline.tju.edu/spinalcord

Principal Investigator: John F. Ditunno Jr., MD
Public Contact: Mary Call, RN, Project Coordinator, 215/955-6579; Fax: 215/955-5152

Project Number: H133N50021
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: This system conducts patient care, research, and education for people with traumatic spinal cord injury. Thomas Jefferson University Hospital and Magee Rehabilitation Hospital in Philadelphia work to provide a continuum of coordinated services to people in southeastern Pennsylvania, southern New Jersey, and northern Delaware.

Model Spinal Cord Injury System

The Institute for Rehabilitation and Research (TIRR)
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Principal Investigator: R. E. Carter, MD, 713/797-5910 (V)
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Project Number: H133N50007
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: Within a system-wide research environment, this multidisciplinary service system: (1) demonstrates and evaluates services and the costs and benefits of those services; (2) demonstrates and evaluates the application of improved methods and equipment; (3) demonstrates methods of community outreach and education; and (4) participates in national studies of the benefits of a spinal cord injury (SCI) service system. This system addresses projects related to: violence-related spinal cord injuries, maximizing interactions with independent living centers, substance abuse among individuals with SCI, disability and rehabilitation-related problems of people with SCI from minority backgrounds, the role of families and personal advocacy in successful community reintegration, and adoption of the SCI systems model of care into the practice of regular health care delivery. This system also houses the database of all presentations and educational materials developed by the nationwide network of Model Spinal Cord Injury System centers.

VCU/MCV Spinal Cord Injured (SCI) Model System

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Principal Investigator: William O. McKinley, MD
Public Contact: 804/828-0861; Fax: 804/828-5704

Project Number: H133N50015
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The Virginia Commonwealth University/Medical College of Virginia (VCU/MCV) Model System of Care for individuals with spinal cord injury merges the best health care practices with an underlying foundation of consumer advocacy, patient education, and individual consumer empowerment. The VCU/MCV Model System project consists of six individual subprojects: Clinical Pathway Outcomes for SCI, Innovative Medical Issues, Dual Disability: Concomitant SCI and Traumatic Brain Injury (TBI), Community Reintegration, Consumer Advocacy, and Substance Abuse. The project: (1) explores clinical pathway outcomes across the continuum of care; (2) evaluates innovative medical issues related to SCI using interactive computer-based education; (3) delineates the incidence of, and formulates management strategies for, the rehabilitation of people with the dual diagnosis of SCI and TBI; (4) institutes several community integration projects in the areas of transportation, return-to-work, and recreation for people with SCI; (5) develops a statewide network for advocacy for people with disability; and (6) identifies incidences and treatment strategies for people with SCI and substance abuse.

Model Spinal Cord Injury Systems
Washington

Northwest Regional Spinal Cord Injury System

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Project Number: H133N50025
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000
Abstract: The Northwest Regional Spinal Cord Injury System provides and evaluates multidisciplinary, comprehensive rehabilitation services to meet patient needs from point of injury through rehabilitation, including vocational and educational preparation, community and job placement, and long-term follow-up. The project also engages in research and collects and submits data to the National Spinal Cord Injury Statistical Center.

Model Construct for Community Integration in SCI

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http://www.mcw.edu/spinal

Principal Investigator: Dennis Maiman, MD; Irma Fiedler, PhD, 414/259-3645; 414/805-7345
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Project Number: H133N50024
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $373,000; FY 96 $373,000; FY 97 $373,000; FY 98 $373,000; FY 99 $373,000

Abstract: This project emphasizes and integrates the major research areas relating to SCI and community integration through a series of research and demonstration projects. The individual projects contribute to overall federal objectives and address problems identified with the research, demonstration services, or data collection aspects of the model SCI system. The project is comprised of a central or "core" body, six research and demonstration projects, and participation in six collaborative projects. The core is focused on the integration of the Wisconsin Model Spinal Cord Injury Center with its multiple components and data compilation requirements. The two main foci of the research and demonstration projects are: enhancement of seamless community integration and quality of life for people with spinal cord injuries, and assessment of clinical and educational SCI programs. Resource and demonstration projects include: The Changing Sexuality Needs of Minority Individuals with Spinal Cord Injury; Substance Abuse and Spinal Cord Injury; Barriers to Community Adjustment in Individuals with Spinal Cord Injury; Development of Assistive Devices for Individuals with Spinal Cord Injury; Wisconsin Spinal Cord Registry: A Public Private Partnership; and Children at Risk for Violence: A Demonstration Project. Dissemination of the results of the demonstration projects, the participation in database collection, and national collaborative studies integrate the role of SCI management in the state of Wisconsin.

Traumatic Brain Injury Care System

University of Alabama/Birmingham
Spain Rehabilitation Center
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novack@sun.rehabm.uab.edu
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Principal Investigator: Thomas Novack, PhD
Public Contact: 205/934-3454; Fax: 205/975-4691

Project Number: H133A980010
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $345,000; FY 99 $345,000
Abstract: The Traumatic Brain Injury Care System (UAB-TBICS) maintains and improves a cost-effective, comprehensive service delivery system for people who incur a traumatic brain injury, from the moment of injury across the life span. The project: (1) studies the course of recovery and outcomes following the delivery of the coordinated system of care; (2) investigates alternative methods of service delivery to people with TBI, exploring emerging technologies to promote recovery; (3) examines key predictors of rehabilitation outcome and costs of care; and (4) places emphasis on home- and community-based activities as well as interventions that maximize community reintegration following TBI. The project establishes and maintains linkages with emergency medical service agencies throughout the state, state vocational rehabilitation and long-term follow-up programs, clinically oriented research activities within the UAB-TBICS itself, and other clinical research programs being conducted at TBI Model Systems nationwide. The program participates in the Model Systems Database, including examining the System benefits, costs, and outcomes.

Model Traumatic Brain Injury Systems
California

A Comprehensive System of Care for Traumatic Brain Injury

Santa Clara Valley Medical Center (SCVMC)
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Project Number: H133A70018
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 97 $345,000; FY 98 $345,000; FY 99 $345,000
Abstract: This program is a comprehensive, interdisciplinary system of care whose rehabilitation program empowers consumers through a clinical program, community services for consumers, several important research studies, and dissemination of information. Clinical services and research studies include: (1) the community Vocational Task Force on vocational issues in brain injury; (2) the Peer Support Program for families and consumers from time of injury through community integration; (3) the Mild Brain Injury (MBI) program, which disseminates an educational brochure to all entering the emergency department who have sustained injuries to the head and those who have sustained an MBI (those who have residual complaints are evaluated for subtle deficits); and (4) a quarterly community education series focusing on TBI topics requested by customers. The project operates in collaboration with several community agencies.

Rocky Mountain Regional Brain Injury System

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Project Number: H133A980020
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000; FY 99 $345,000
Abstract: The Rocky Mountain Regional Brain Injury System (RMRBIS) operates a comprehensive system of care, contributes to the National TBI Database, conducts research, and disseminates the results. Collaborating programs include Swedish Medical Center and St. Anthony Hospital, two highly regarded Level I and Level II trauma centers and acute care facilities, and community-based programs that range from Colorado's Medicaid Waiver Program, to private vocational services, to programs for the arts and recreation, that offer lifelong services, ongoing follow-up, and an enhanced quality of life to people with TBI and their families. RMRBIS conducts 13 distinct yet complementary research projects to: (1) compare the various treatment pathways occurring in Colorado; (2) evaluate the effectiveness of vocational and other community-based services; (3) assess the potential of a pharmacological intervention for improving memory; (4) develop and validate neuropsychological tests; (5) improve outcome predictions through the quantification of MRI results and environmental factors; (6) examine the influence of funding alternatives; and (7) seek a better understanding of the roles of violence and substance abuse in TBI.

Georgia Model Brain Injury System (GAMBIS)

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Center for Rehabilitation Medicine
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Principal Investigator: Anthony Stringer, PhD
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Project Number: H133A980028
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $345,000; FY 99 $345,000

Abstract: The Georgia Model Brain Injury System (GAMBIS) has the capacity to follow approximately 45 percent of the moderate to severe brain injury cases expected annually in metropolitan Atlanta, and combines the academic resources of Emory University and the Crawford Research Institute of Shepherd Center with the clinical resources inherent in four trauma centers, two inpatient rehabilitation programs, and multiple post-acute and subacute rehabilitation pathways. Project activities include: (1) comparisons between the efficacy, cost-effectiveness, and cost per quality-adjusted life year for patients in home-based and facility-based sub-acute care; (2) outcome comparisons between TBI patients grouped by injury severity to determine optimal matches between patients and service delivery methods; (3) the impact of violence as a cause of injury on cost and outcome within all post-acute treatment pathways; (4) studying the efficacy of telecommunications technology and a consumer-directed Clubhouse Program in supporting community and vocational reentry; and (5) the role of traditional (e.g., injury severity, level of insurance benefits) and novel (e.g., progesterone level, apolipoprotein E genotype) predictors of outcome and subjective well-being following TBI. GAMBIS also contributes to the TBI Model Systems National Database.

Traumatic Brain Injury Model System

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Project Number: H133A980034
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $345,000; FY 99 $345,000

Abstract: This Traumatic Brain Injury (TBI) Model System provides a comprehensive spectrum of care for people with TBI through the collaborative effort of a complex of organizations committed to participation in the Model Systems National Database and a variety of research and demonstration projects. Objectives include demonstrating a comprehensive model system of care for individuals with TBI; investigating the efficacy of alternative service delivery; identifying and evaluating interventions that can improve vocational outcomes and community integration; developing key predictors of rehabilitation outcome, including subjective well-being; determining the relationship between cost, interventions, and outcomes; and examining the implications of violence as a cause of TBI. The six research studies of the project include: (1) responsiveness of the Community Integration Questionnaire and the Supervision Rating Scale; (2) attributes of dysarthric speech as a predictor of successful use of voice recognition software for computer access; (3) efficacy of a group model for including family members in the community integration of the patient with TBI; (4) efficacy of community skills group outpatient therapy; (5) palmtop computer technology as a prospective memory aid for individuals with TBI living in the community; and (6) post-traumatic apathy: analysis, pharmacologic treatments, and outcomes.

Model Traumatic Brain Injury Systems
Michigan

Southeastern Michigan Traumatic Brain Injury System/NIDRR TBI Model Systems National Database

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Department of Physical Medicine and Rehabilitation
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Principal Investigator: Mitchell Rosenthal, PhD, 313/745-9769
Public Contact: Cynthia Harrison-Felix, 313/745-1180; Fax: 313/745-1175

Project Number: H133A70021
Start Date: January 1, 1998
Length: 60 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $344,989 (SEMTBIS); $125,000 (TBI National Database); FY 98 $344,989 (SEMTBIS); $125,000 (TBI National Database); FY 99 $344,989 (SEMTBIS); $125,000 (TBI National Database)

Abstract: This project maintains and enhances an existing model system of care and conducts collaborative and local research projects including the following: (1) a multicenter collaborative project with existing Traumatic Brain Injury (TBI) Model Systems entitled "Post-Acute Service Delivery: Needs, Interventions, Costs and Outcomes;" (2) the local project "Evaluation of an Enhanced Community-Based Vocational Training Program Serving Economically Disadvantaged Persons with TBI;" (3) rehabilitation outcome, addressed through a combination of multicenter collaborative research and dissemination projects, as well as several local projects; (4) a multicenter collaborative project, "Length of Stay in Inpatient Rehabilitation: Does It Make a Difference?" (5) a local project, "Managed Primary Care for Persons with Traumatic Brain Injury: Prediction of Long-Term Medical Care Utilization and Costs;" and (6) a multicenter collaborative project led by this project: "Implications of Violence as a Cause of TBI on Cost, Functional Outcome, and Long-Term Community Integration." The project continues to manage the TBI National Database Center. Additional goals include coordinating research and dissemination activities with other NIDRR TBI grantees to optimize research output, minimize redundancy of effort, and engage in collaborative dissemination.

Model Brain Injury System

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Project Number: H133A980036
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $345,000; FY 99 $345,000
Abstract: This Model System enables people with traumatic brain injury (TBI) in the Minnesota region to participate fully in their families, communities, school, and work. The System's 14 studies and projects include: (1) providing the appropriate continuum of care for the approximately 500 people with TBI admitted yearly through the Mayo Level I Trauma Center through an existing Case Coordination system that facilitates access to hospital- and community-based services for community reintegration; (2) determining the long-term outcomes of postacute rehabilitation pathways; (3) evaluating key outcome predictors, including apolipoprotein and genotype; (4) examining the implications of violence for outcome, costs, and special rehabilitation needs; (5) demonstrating innovative postacute rehabilitation and vocational interventions and evaluating their effectiveness through experimental and quasi-experimental designs; (6) further evaluating specialized TBI vocational services at the Mayo Brain Injury Program that result in almost 75 percent of the people served in community-based placements; (7) extending Annegers's previous population-based epidemiological studies of TBI to determine the effect of severity and type of TBI (e.g., violent vs. nonviolent) on outcomes and costs; and (8) developing and testing cost models using prospective and retrospective data and national TBI Model System data.

Traumatic Brain Injury (TBI) Model System of Mississippi (TBIMSM)

Mississippi Methodist Rehabilitation Center
Brain Injury Program
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http://www.mmrcrehab.org

Principal Investigator: Mark Sherer, PhD
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Project Number: H133A980035
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 98 $345,000; FY 99 $345,000

Abstract: The Traumatic Brain Injury (TBI) Model System of Mississippi (TBIMSM) submits data to the national database, collaborates with other TBI Model System projects, and performs a program of research and demonstration, dissemination, and collaborative projects. Issues addressed are of particular importance to people with TBI who live in rural areas such as Mississippi. The System contributes to improved understanding of methods of service delivery, interventions to improve vocational outcomes and community integration, extended job coaching, rural vs. urban outcomes, electrophysiology, awareness, depression, delirium after TBI, key predictors of rehabilitation outcomes, the relationship of cost of care to functional outcomes, and special implications of TBI caused by violence. Two demonstration projects involve a Seizure Clinic and a Spasticity Clinic. Findings are disseminated to people with TBI, their families and significant others, rehabilitation professionals, and makers of public policy both locally and nationally. TBIMSM solicits support, feedback, and guidance from people with TBI, family members, significant others, advocacy agencies, and service agencies to ensure that the projects address the needs and concerns of these people and organizations. The system is a collaboration between the Mississippi Methodist Rehabilitation Center and the University of Mississippi Medical Center.

Missouri Model Traumatic Brain Injury System (MOMBIS)

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Principal Investigator: Brick Johnstone, PhD, 573/882-6258
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Project Number: H133A980008
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $344,999; FY 99 $344,999
Abstract: This model system, based in central Missouri, provides a continuum of traumatic brain injury (TBI) care to an underserved and understudied population: communities that are primarily rural. The project also completes a series of innovative research programs and contributes data to the national database for TBI Model Systems. MOMBIS develops a model system of care that: (1) investigates the efficacy of alternative methods of service-delivery interventions after inpatient rehabilitation discharge and after other post-acute treatment pathways; (2) identifies and evaluates interventions using emerging technology that can improve vocational outcomes and community integration; (3) develops predictors of rehabilitation outcome, including subjective well-being, at hospital discharge and at long-term follow-up; (4) examines the relationships among cost of care, specific treatment interventions, and functional outcomes; and (5) examines implications of TBI caused by violence on treatment interventions, rehabilitation costs, and long-term outcomes. MOMBIS collects and contributes data on patient characteristics, diagnoses, causes of injury, interventions, outcomes, and costs to a uniform national database; participates in collaborative research with other TBI Model System centers; and coordinates research efforts with other NIDRR TBI-related grant recipients.

Northern New Jersey Traumatic Brain Injury System (NNJTBIS)

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http://www.kmrrec.org

Principal Investigator: Mark V. Johnson, PhD, Project Director
Public Contact: 973/243-6876; 973/243-6810; Fax: 973/243-6963

Project Number: H133A980030
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $343,381; FY 99 $343,381

Abstract: The Northern New Jersey Traumatic Brain Injury System (NNJTBIS) is a comprehensive set of projects designed to improve the quality of care for people with traumatic brain injury (TBI) in New Jersey and to answer selected research questions. In both research and development projects, the NNJTBIS emphasizes the interplay of medical, neuropsychological, social, and economic factors. Three small randomized clinical trials include: an intervention program to train caregivers to manage behavior problems in the home or other natural settings, a program of cognitive remediation and cognitive-behavioral therapy for people with TBI living in the community, and an improvement to a cognitive remediation program involving enhanced choice by the person with TBI. Other research addresses issues of: how to improve outcome measures by incorporating the expressed values and perceptions of people served, financial issues and costs, the implications of violence in the etiology of TBI, substance abuse, and consequences of delay or refusal of Medicaid coverage for severely injured people with TBI. Demonstration projects fill gaps in vocational rehabilitation in New Jersey by providing augmented work trials and education of vocational rehabilitation counselors regarding TBI, develop trial cognitive remediation and social support tools for the Internet, and educate emergency room personnel regarding mild TBI. Educational offerings for people with TBI, their families, and professionals are provided through conferences, retreats, talks, support groups, and development of a TBI resource center. Local advisory boards advise System staff, and plans include a task force to improve the system of care in New Jersey.

The Carolinas Traumatic Brain Injury Rehabilitation and Research System (CTBIRRS)

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Project Number: H133A980025
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $345,000; FY 99 $345,000

Abstract: The Carolinas Traumatic Brain Injury Rehabilitation and Research System (CTBIRRS) improves the lives of people with newly acquired traumatic brain injury (TBI) through a comprehensive service delivery system. Research studies investigate: the effectiveness of alternatives to a comprehensive outpatient brain injury day program; the use of a Community Transition Coordinator to improve access to services and enhance community reintegration; the novel use of electronic personal organizers as a memory aid; the predictability of functional outcomes, quality of life, and cost of care for those with TBI; the impact of TBI on spouses and significant others; the efficacy and cost of serial casting versus ultrasound with weight bearing for contractures; epidemiologic characteristics, rehabilitation costs, and the outcome of violence-induced TBI compared to nonviolent TBI incidence, as well as the cost and outcome of depression following violence-induced TBI versus nonviolent TBI; and the outcomes of those who suffer severe TBI who do not receive inpatient rehabilitation. Five of the studies involve collaboration with other NIDRR Model Systems. In addition, collaboration takes place with a non-Model-Systems NIDRR grantee to address TBI-related issues. CTBIRRS disseminates research findings via telemedicine, free computer and Internet access for people with disabilities, and a Web site, as well as local and national committees, programs, conferences, and peer-reviewed publications, and contributes to the national TBI Model System Database.

Ohio Regional Traumatic Brain Injury Model System

Ohio Valley Center for Brain Injury Prevention and Rehabilitation
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Principal Investigator: John D. Corrigan, PhD, 614/293-3830
Public Contact: Gary Lamb-Hart, 614/293-3802; Fax: 614/293-8886

Project Number: H133A70032
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 97 $344,975; FY 98 $344,975; FY 99 $344,975
Abstract: The Ohio Regional Traumatic Brain Injury (TBI) Model System serves a population of two million people living in 21 urban and rural counties in central and southern Ohio. It provides specialized care from emergency evacuation through community integration and lifelong living. The project is a collaborative effort of the Ohio State University Medical Center, OhioHealth's Grant Medical Center, and the Ohio Valley Center for Brain Injury Prevention and Rehabilitation.

Oregon Model Traumatic Brain Injury System

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Principal Investigator: Randall M. Chesnut, MD
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Project Number: H133A980027
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000; FY 99 $345,000
Abstract: This model system compares treatment and outcomes among people with TBI cared for within the model system versus those who follow alternative care paths. The sample: (1) includes trauma system patients who remain in Portland and those who return to rural homes after discharge, allowing for a comparison of care paths as determined by environment; (2) assesses outcome based on the type and extent of care by evaluating payer programs by level and type of funding; and (3) develops and validates two key predictors of outcome: a measure of acute care and a social adjustment scale. This understanding of outcomes as determined by care path (model vs. alternative), environment (rural vs. urban), and payer program (level of funding) is used to address the three primary needs of Oregon residents with TBI and their families: information, access, and quality. Ancillary demonstration projects implement and evaluate caregiver training and home-based multidisciplinary rehabilitation as an alternative to post-acute treatment interventions.

A Model System of Brain Injury Care in the Philadelphia Region

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Project Number: H133A70033
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $345,000; FY 98 $345,000; FY 99 $345,000

Abstract: This traumatic brain injury (TBI) Model System of Care serves people with TBI and their families in the greater Philadelphia region. A full continuum of TBI services is provided through the Drucker Brain Injury Center at MossRehab, using a transdisciplinary dedicated team model. Post-acute services are community-based and include a client-directed Clubhouse and an Affirmative Business. The Model System provides extra case management and tracking to meet the needs of enrollees, many of whom are inner-city residents with social and economic disadvantages. There is also a strong emphasis on research. Through the Moss Rehabilitation Research Institute (MRRI), longitudinal outcome data are collected for the National TBI Model System Database. In addition, 11 local and collaborative projects address topics such as the evaluation and rehabilitation of motor control, the effects of emerging technologies on social and vocational outcome, psychosocial factors affecting recovery, and the clinical assessment of attention. Other research projects are concerned with the prediction of rehabilitation costs, case mix adjustment for improved outcome prediction, and the effects of service availability on outcome. Three consumer Advisory Boards operate to provide feedback and quality improvement to both research and clinical programs. The Model System project is a collaboration among MossRehab/MRRI and the trauma/neurosurgery services of Albert Einstein Medical Center and Temple University Hospital.

Traumatic Brain Injury Model System of TIRR

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Project Number: H133A70015
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $345,000; FY 98 $345,000; FY 99 $345,000
Abstract: This project develops and demonstrates a comprehensive, multidisciplinary rehabilitation services model system for people with traumatic brain injury (TBI). The project: (1) investigates the efficacy of alternative methods of service delivery interventions after inpatient rehabilitation discharge and after other postacute treatment pathways; (2) identifies and evaluates interventions, including those using emerging technology, that can improve vocational outcomes and community integration; (3) develops key predictors of rehabilitation outcome, including subjective well-being at hospital discharge and at long-term follow-up; (4) determines the relationship between cost of care, specific treatment interventions, and functional outcomes; and (5) examines the implications of violence as a cause of TBI on treatment interventions, rehabilitation costs, and long-term outcomes. In carrying out these purposes, the project participates in clinical and systems analysis studies of the Traumatic Brain Injury Model Systems by collecting and contributing data on patient characteristics, diagnoses, causes of injury, interventions, outcomes, and costs, to a uniform, standardized national database. It participates in collaborative projects with other model system programs and coordinates research efforts with other NIDRR grantees that address TBI-related issues.

Virginia Traumatic Brain Injury Model System

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Principal Investigator: Jeffrey S. Kreutzer, PhD
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Project Number: H133A980026
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $344,914; FY 99 $344,914
Abstract: The Virginia Traumatic Brain Injury Model System has four research projects and three demonstration projects. The System: (1) examines the needs, outcomes, and costs of alternative service delivery systems; (2) examines the etiology and incidence of rehospitalization in the one-to-four years following TBI to evaluate predictors of acute rehospitalization and to characterize the relationship between rehospitalization and long-term outcomes; (3) investigates identification and placement practices in secondary schools and tracks educational and vocational outcomes for youth with TBI, and identifies best practices to facilitate mainstreaming and optimal educational and vocational outcomes; (4) compares the costs of violent injury to the costs of other causes, identifies the types and intensities of services used by victims of violence, relates the intensity of services to payer source and other demographic information, evaluates long-term implications by assessing employment, community integration, substance abuse status, and subjective well-being, and identifies characteristics that predispose to violent injury; (5) assesses vocational outcomes in return-to-work interventions for people with mild and moderate brain injuries; (6) develops, with consumer input, a consumer education and self-advocacy workshop to be given throughout the state; and (7) develops a "best practices" handbook on work supports for people with brain injury that is field tested and disseminated via the Internet and other avenues.

The University of Washington Traumatic Brain Injury Model System

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Project Number: H133A980023
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000; FY 99 $345,000

Abstract: The University of Washington Traumatic Brain Injury Model System operates a comprehensive, multidisciplinary Model System of Care serving people with TBI from the time of injury to integration into the community. The System: performs innovative research and demonstration projects; participates in clinical and systems analyses by contributing to a uniform, standardized national database; collaborates with other model system sites in addressing TBI-related issues; and engages in dissemination activities that include professionals, people with brain injury and their families, and the community at large. The Department of Rehabilitation Medicine at the University of Washington Academic Medical Center, which includes Harborview Medical Center and the University of Washington Medical Center, collaborates to conduct: (1) a randomized, controlled trial examining the impact of scheduled, system-initiated telephone intervention on outcome (including employment and community integration); (2) two studies examining the state and federal costs of TBI, and cost-effectiveness of the randomized study; (3) two complementary studies examining early costs and discharge decisions in violence-related TBI and the relationship among violence, rehabilitation services received, and long-term outcome; (4) a study examining long-term outcome as a function of alternative pathways of post-acute treatment; and (5) three demonstration projects, with two using technology to develop community-based resources and professional communication.

Functional and Rehabilitation Outcomes of Patients Who Have Developed Guillain-Barre Syndrome

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Principal Investigator: Jay M. Meythaler, MD
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Project Number: H133G70032
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 97 $116,993; FY 98 $121,585; FY 99 $124,498
Abstract: This study provides data to describe the significance of rehabilitation to Guillain-Barre Syndrome (GBS). GBS is the most common cause of acute neuromuscular paralysis in developed countries and afflicts about 5,000 people annually in the United States. However, the extent and duration of physically disabling secondary results of GBS have never been described. Vocational and psychosocial outcomes also have not been assessed. Without a prospective analysis of such outcomes, the magnitude of the problems GBS presents for the rehabilitation community remains unknown, and appropriate resources and pro-active treatment approaches are not allocated and developed. In this project results of pilot studies and a database collection effort are used to develop new and refined research questions and hypotheses, and to build appropriate mechanisms into the database to address those questions. The database is built upon the collective experience of an investigative team that has successfully developed and maintained the National Spinal Cord Injury Statistical Center (NSCISC).

Amantadine to Improve Neurorecovery in TBI

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Principal Investigator: Jay M. Meythaler, MD
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Project Number: H133G80025
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $121,290; FY 99 $124,567
Abstract: This project attempts to establish the efficacy and detrimental effects of amantadine in the acute stages of recovery from traumatic brain injury (TBI). Because TBI is one of the most significant causes of disability to able-bodied people in the most productive period of life, this research may reduce a significant disability and economic burden. The most common cause of TBI is high-speed transportation accidents; such accidents result in a mechanism of injury commonly described as diffuse axonal injury, which results in a decrease in dopamine turnover in the brain, leading to some degree of impaired initiation and attentional deficits. Research suggests that increasing dopamine turnover at the synaptic level may have a beneficial effect on recovery from brain injury. Amantadine has been the subject of considerable interest and clinical use; however, the definite beneficial effect of amantadine on brain injury recovery has never been demonstrated. Because amantadine is available generically, the private sector shows little interest. The study design is a double-blind, randomized, controlled trial using well-established outcome measures, including behavioral and cognitive measures.

Field-Initiated Projects (FIPs)
Colorado

Marketing Health Promotion, Wellness, and Risk Information to Spinal Cord Injury Survivors in the Community

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Principal Investigator: Gale Whiteneck, PhD, 303/789-8204
Public Contact: Ken Gerhart, 303/789-8308; Fax: 303/789-8441

Project Number: H133G80011
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 98 $124,995; FY 99 $124,989
Abstract: Building on experience gained from the RRTC in Aging with Spinal Cord Injury (SCI) at Craig Hospital, this project offers health promotion, wellness, and risk information to SCI survivors. Recent reports from survivors, caregivers, and researchers are demonstrating that SCI is not the unchanging disability it was once thought to be; over time many survivors face medical complications, psychosocial concerns, and diminishing quality of life. Although many of these adverse outcomes could be averted or lessened with active health maintenance and wellness strategies, SCI survivors in the community face a dearth of the information they need to make such positive lifestyle choices. This project creates: (1) a Wellness and Risk Assessment Profile that provides individualized SCI-specific health risk appraisals via the Internet; (2) regular health information columns in three widely-read consumer journals; (3) custom brochures targeting the prevention and health promotion needs of SCI survivors in the community; (4) a handbook offering information about making wise health and lifestyle choices for recently injured SCI survivors; (5) a handbook targeting caregivers of SCI survivors; and (6) a curriculum for people who teach and provide support to caregivers.

Toward a Risk Adjustment Methodology for People with Disabilities

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Project Number: H133G70072
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $124,983; FY 98 $124,401; FY 99 $91,550
Abstract: This knowledge dissemination project provides information to health care policy makers and payers that advances development of a risk adjustment system for working- and retirement-age people with disabilities. Risk adjustment reduces the incentive for risk selection and promotes access to needed health services. To achieve this goal, the project assembles a panel of leading experts on risk adjustment and disability to guide the development of a consensus report that: (1) details the state of science in risk adjustment; (2) evaluates the appropriateness of health care outcome indicators for people with physical and mental disabilities; and (3) provides a set of recommendations for modifying and implementing risk adjustment methodologies that enhance access to health services for people with disabilities enrolled in public sector and private sector health plans.

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Aging and Adjustment After Spinal Cord Injury: A Twenty-Five-Year Longitudinal Study

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Project Number: H133G70111
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $124,796; FY 98 $122,475; FY 99 $121,094
Abstract: People are now living longer after spinal cord injury (SCI), yet only limited research has addressed issues of aging and life adjustment after SCI. The purpose of this study is to implement the fifth stage of data collection to a 25-year longitudinal study that has traced the course of life adjustment after SCI over the past two decades. The unique contributions of this data collection include: (1) inclusion of nearly 100 participants who have been injured more than 30 years; (2) first-time longitudinal comparisons among large samples of women and racial/ethnic minorities (including more than 200 minority participants, 63 of whom are women); and (3) use of consumer advisory groups to help to identify factors accounting for change.

Relation of Rehabilitation Intervention to Functional Outcome in Acute and Subacute Settings

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Principal Investigator: Allen W. Heinemann, PhD
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Project Number: H133G60135
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000; FY 99 (No-cost extension through 8/31/00)
Abstract: Seven rehabilitation facilities that provide acute medical rehabilitation are assessing rehabilitation outcomes and predictors of outcomes, using a method for assessing rehabilitation therapy goals, activities, and barriers to goal attainment. This project is extending that study. It uses the same methodology used by five sites that provide *subacute* rehabilitation. Being assessed are: (1) patient attributes at admission, such as impairment severity, comorbid conditions and complications, functional deficits, and demographic characteristics; (2) therapeutic interventions (type, quantity, duration, modality, and intensity) provided in acute and subacute settings; and (3) outcomes achieved (functional status, discharge destination, and patient satisfaction). The lead project, the NIDRR-funded RRTC on Functional Assessment and Evaluation of Rehabilitation Outcomes, was awarded to the State University of New York.

Enhancement of Upper Limb Functional Recovery in Stroke Using a Computer-Assisted Training Paradigm

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Project Number: H133G80063
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $124,992; FY 99 $124,923
Abstract: This study investigates use of a novel computer-assisted isometric training regime to overcome abnormal movement synergies following hemiparetic stroke. In most stroke patients, these synergies are reflected, in part, by the existence of abnormal coordination between the activations of shoulder and elbow muscles. These stereotypic movement patterns found in stroke survivors are functionally disabling and often debilitating, yet are not well understood in the rehabilitation setting. Current neurotherapeutic approaches to the amelioration of these abnormal patterns have produced, at best, limited functional recovery. Therefore, the objectives of this investigation are to evaluate and demonstrate the usefulness and effectiveness of a novel static training regime to enhance the quality of life of consumers with stroke. The effect of two training regimes on functional arm movement are being investigated in 40 hemiparetic stroke subjects. The first protocol uses a general, classical strengthening regimen to increase torque production in specific directions. The second approach strengthens subjects using torque combinations that require the subject to deviate progressively from their abnormal torque synergies. Assessment of the effectiveness of these two protocols is based on quantitative comparisons of voluntary upper limb movements performed pre- and post-training.

The SPIRATE Project (Spinal Injury Risk Assessment for ThromboEmbolism)

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Principal Investigator: David Green, MD, PhD
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Project Number: H133G990046
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $135,244

Abstract: The purpose of this study is to develop a risk assessment methodology to guide the intensity and duration of antithrombotic prophylaxis. The study is performed in two parts: a retrospective analysis of 500 patients treated by the Midwest Regional Spinal Cord Injury Care System over the past decade, and a prospective analysis of 100 patients admitted for care of spinal cord injury. In the first part, archival data on the 500 patients is analyzed to identify risk factors for thromboembolism. In the second part, the 100 patients all receive prophylaxis consisting of compression leggings and heparin, they are examined daily for clinical evidence of thrombosis, and they have bilateral contrast venography prior to discharge. Three risk scoring systems are tested. The first is based on the retrospective study. The second is expanded to include additional factors such as functional measures and emotional well-being assessments. A third risk scoring system, to be developed, includes the data from the second system as well as the day-to-day changes in the symptoms recorded over the course of the study for individual patients. The cross-generalizability of the systems is assessed, and the final instrument is used to assign patients at high risk to more intensive prophylaxis.

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Secondary Prevention Trial of Exercise and Diet for Improvement of Physical Fitness, Independence, and Overall Health in Adult Paraplegics

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Project Number: H133G990143
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,959

Abstract: This project investigates the impact of an exercise intervention coupled with nutrition education on the strength and fitness of a sample of overweight paraplegics with chronic illnesses. This intervention improves cardiovascular fitness and strength leading to improved independence and improved overall health. The primary research objectives are to recruit adult paraplegics with chronic disease for involvement in the program, and compare the effects of the program on physical fitness in participants who have completed the program to physical fitness in those participants randomized but waiting, during the same 12 weeks, to begin the intervention. The impact of the program is assessed using changes in strength and body composition, levels of independence, dietary knowledge and intakes, blood pressure, the total-to-high-density lipoprotein cholesterol ratio, bone mineral density, and fasting glucose concentrations.

Mild Traumatic Brain Injury in High School Football

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Project Number: H133G70087
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Joel Myklebust, PhD
NIDRR Funding: FY 97 $122,981; FY 98 $120,525; FY 99 $122,597
Abstract: The goal of this multidiscipline research project is to conduct an intensive exploration of factors related to mild traumatic brain injury (MTBI) in youth. Even with clear and specific criteria for discriminating minor from moderate or severe brain injury, several factors may affect the reliability of MTBI classification. For accurate diagnosis, reliable observers must be present. The presence of multiple trauma in some cases may compound and prolong the disability, and may also make it difficult to distinguish the cause of some forms of symptomatology. The effects of alcohol or other drugs, when present, often mimic symptoms of MTBI, further confounding its diagnosis. Given these potential problems, Tulane University has chosen to study minor brain injury within the context of high school football. A population of young athletes participating in organized football allows for a more controlled study, due to the fact that additional massive trauma is absent, trained individuals are present at the time of injury, and secondary complications rarely occur that further brain injury.

Field-Initiated Projects (FIPs)
Maryland

Measuring Functional Communication: Multicultural and International Applications

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Project Number: H133G70055
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 97 $125,000; FY 98 $125,000; FY 99 $125,000
Abstract: The long-term objective of this project is to improve the quality of life for adults with communication disabilities by expanding and validating an assessment tool for multicultural and international populations. Assessments can then be made regarding communication functions and needs, and rehabilitation can be individualized to optimize the person's ability to communicate in their natural environments. Reliable communication skills are a requisite for individuals to achieve their social, educational, and vocational potentials, and for patients to understand and participate in their care and recovery. Activities of this project include: (1) development of a measure of quality of communicative life; (2) validation of the extended American Speech-Language-Hearing Association Functional Assessment of Communication Skills for Adults with multicultural groups including African Americans, Asian Americans, Caucasian, Hispanic, and Native Americans; (3) validation with various populations with communication disorders such as those caused by brain injury, stroke, Alzheimer's disease and related dementias, and acquired neurological disorders; and (4) validation in other English-speaking countries.

The Parenting Options Project: A Development Project for Parents with Psychiatric Disabilities

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Project Number: H133G70079
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,408; FY 99 $124,671
Abstract: The purpose of this project is to develop new rehabilitation techniques focusing on parents with psychiatric disabilities, an emerging population whose needs often have been ignored by rehabilitation specialists and mental health service providers. Existing parent education programs often are based on traditional clinical models developed for children at risk of child abuse, or models developed for parents without disabilities. Because consumers are not active participants in program development, existing services often are irrelevant to parents with psychiatric disabilities, and may present barriers to parents' participation. No parent skills training model has been developed with systematic input from all stakeholders, and no goal-setting or assessment tool exists for this significant domain of adult functioning. Employing participatory action research (PAR) strategies, the project's goals are to: (1) develop an education and skills training curriculum for parents with psychiatric disabilities; (2) develop a goal-setting and assessment tool for parents and related professionals; and (3) evaluate the PAR development process.

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Treatment of Upper-Extremity Spasticity with Botulinum Toxin: Motor Control Evaluation to Determine Efficacy

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Project Number: H133G60161
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 96 $124,992; FY 97 $124,992; FY 98 $124,992; FY 99 (No-cost extension through 12/31/99)

Abstract: This program is studying 30 subjects between the ages of 7 and 13 who have upper extremity spasticity that interferes with functional tasks. The subjects are evaluated for tone, range of motion, strength, and ability to perform standardized tasks. They then undergo a series of motor control tests, in which they are asked to perform simple tasks with their upper extremities. Movement parameters such as reaction time, speed, bilateral synchronization, and peak angular velocities are assessed. Electromyography measurements examine patterns of muscle activity during movements, which can be compared to normal patterns. The subjects undergo a series of testing over six months, the upper limit of expected efficacy of an injection of botulinum toxin. The hypothesis is that the subjects have an improvement toward a more normal pattern on all testing, which gradually decreases back toward baseline with time. Differences from baseline are analyzed with paired t-tests or paired rank sum tests. The duration of efficacy is measured using survival analysis techniques. Researchers examine the magnitude of effect of the injections to identify a subgroup that receives a maximum benefit from the treatment.

Community Reintegration and Quality of Life Following Traumatic Brain Injury

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Project Number: H133G80076
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: This project increases understanding of community reintegration (CI) and quality of life for people with traumatic brain injury (TBI), and develops instruments that can be used in future research. CI refers to a return to the mainstream of community life, and again becoming an active and contributing member of one's family and society. When people with TBI, their families, and professionals in rehabilitation discuss quality of life following TBI, they consider home and community roles and activities, rather than the impairments or disabilities resulting from the injury. The best currently available instrument, the Community Integration Questionnaire (CIQ) has serious limitations regarding the measurement of all aspects of CI in a comprehensive, reliable, and sensitive manner. This project: (1) produces a new version of the CIQ, and assesses its validity and reliability; (2) develops norms for the new CIQ, for subgroups defined by age, gender, and racial/ethnic group; (3) creates a life-satisfaction measure specific to people with TBI, and assesses its validity and reliability; (4) investigates the relationship between CI and subjective well-being; (5) describes the CI and quality of life of TBI survivors, with a focus on severity of injury, age, gender, socioeconomic status, and racial and ethnic group differences; and (6) disseminates the instruments and other results to people with TBI and their families, professionals, policy makers, and researchers.

The Impact of Managed Care on Rehabilitation Services and Outcomes for Persons with Spinal Cord Injury

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Project Number: H133G80073
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $123,963; FY 99 $123,963
Abstract: This project examines the impact of managed care on rehabilitation services and outcomes for people with spinal cord injury (SCI). The study analyzes demographic, medical, functional, community integration, life satisfaction, and service delivery data collected from Model Systems projects to determine how managed care is altering the acute and rehabilitative management of SCI and how it affects short- and long-term outcomes, such as functional status and community integration. Objectives include: (1) describing the pathways of newly injured people with SCI through the health care system, from injury to stable community residence: acute care, rehabilitation care (including inpatient-acute, subacute, day hospital, and outpatient), home care, and readmissions for complications; (2) assessing the impact of managed care on these pathways: determining whether managed care patients differ from those with more traditional health insurance in terms of services received (providers, services, durations); and (3) assessing the effect of various pathways on the outcomes for this patient population at one and two years after injury in functional, medical, psychological, and health services utilization. The project team disseminates findings to consumers, managed care and other payer organizations, policy makers, and SCI professionals using a variety of mechanisms. Findings are expected to contribute to the redesign of the SCI Model Systems National Database to make it correspond optimally to the organization of health and rehabilitative services in the 21st century.

Effect of Motor Learning Procedures on Brain Reorganization in Subjects with Stroke

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Project Number: H133G80041
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $105,969; FY 99 $108,461

Abstract: This project determines whether elements of motor learning can promote brain reorganization and recovery of function in individuals with stroke. Two interventions have been shown to be effective in helping people recover from stroke, "forced use" of the weak side and electrical stimulation. Investigators have hypothesized that these treatments may unmask dormant motor centers or improve synaptic effectiveness, but no evidence has been forthcoming. The project involves two experiments: (1) subjects with stroke receive 20 training sessions at a finger movement tracking task in which they are forced to process the perceptual motor information mentally and learn to respond accurately; and (2) different subjects with stroke receive 20 days of electrical stimulation to the weak forearm muscles. For both experiments, changes in finger function are measured with tracking and manual dexterity tests. Neuroplastic changes in the brain are measured with functional magnetic resonance imaging. This project may show for the first time that physical rehabilitation procedures may stimulate beneficial reorganization of the brain following stroke and invite further experiments to optimize treatments.

Creating Permanent Behavioral Health Access for Rural Missourians with TBI: Teleconferencing Application for Improved Services

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Project Number: H133G80033
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $104,462; FY 99 $111,129
Abstract: This project offers one-on-one training of community mental health providers via teleconferencing sessions, and uses information learned from these sessions to create specialized training manuals, brochures, and workshops that synthesize issues regarding traumatic brain injury (TBI) behavioral health. Community re-entry after TBI carries a host of physical, emotional, social, and vocational challenges for patients and families. In response to these challenges, behavioral health care is a central component in the rehabilitation process. Rural residents with TBI receive behavioral health services while in acute rehabilitation programs, but often are unable to access follow-up services in their local rural communities due to lack of coordination among inpatient and outpatient service providers. A permanent service structure of providers with competency in TBI adjustment and rehabilitation is desperately needed in rural areas. Services offered through this project are integrated among the adult inpatient rehabilitation, the post-rehabilitation recovery, and the extended outpatient adaptation and community reintegration periods of TBI adjustment. The project offers the educational tools to all rural mental health providers across the state, and institutes a permanent rural TBI behavioral health service structure.

Developing and Evaluating an Interactive Tool to Support Literacy Learning in Adolescents with Severe Speech and Physical Impairments

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Project Number: H133G990501
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 98 $124,755; FY 99 $124,755
Abstract: This project creates a Web-based tool, the Adolescent Literacy Learning Link (ALL-Link), that provides adolescents with Severe Speech and Physical Impairments (SSPI) with an innovative learning environment. ALL-Link features age-appropriate reading and writing activities that are theoretically grounded in inclusive models of comprehension and composition that apply equally to people with and without disabilities. Projected outcomes of ALL-Link development include: (1) successful development and implementation of an innovative and interactive literacy-learning Web site for adolescents with SSPI and their teachers; (2) wide dissemination of the site, and parallel or related materials for classrooms without Internet access; and (3) project management that efficiently provides target groups with increased access to and use of the Web site, related materials, and project findings.

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Hippocampal Dysfunction Following TBI: A Functional and Volumetric MRI Study of Memory Loss and Recovery

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Project Number: H133G70031
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $125,000; FY 98 $124,995; FY 99 $124,999

Abstract: For patients and their caregivers, one of the most prominent and disabling of the numerous traumatic brain injury (TBI) sequelae is loss of memory; abnormalities of hippocampal function and structure underlie these memory deficits and mechanisms of loss and recovery. This project: (1) tests the hypothesis that an abnormal activation in the hippocampal formation (HF) and temporal neocortex serves as the central neural substrate of disordered anterograde memory shortly after TBI; (2) relates recovery of memory functioning to normalization of temporal-hippocampal activation pattern 12 months after TBI; and (3) characterizes the relationship between abnormalities in hippocampal function as measured by functional MRI and changes in hippocampal volume.

Acupuncture as an Adjunctive Treatment in Stroke Rehabilitation

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Project Number: H133G990082
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,556
Abstract: The purpose of this research is to design and evaluate the efficacy and safety of acupuncture in ways that may be beneficial, in addition to standard rehabilitation, in restoring and improving functional recovery of stroke survivors. The project directly addresses the medical, cognitive, and psychological sequelae of stroke. The following acupuncture issues are addressed: (1) which acupuncture points and model to use; (2) when to start acupuncture; and (3) electroacupuncture. The project also compares acupuncture with and without electrical stimulation in stroke treatment. The aim of the study is to use rigorous research methods to determine: (1) whether acupuncture has a beneficial effect on activities of daily living, motor and cognitive functioning, and quality of life in post-stroke survivors, above and beyond standard rehabilitation; and (2) if so, whether the length of time after stroke, before acupuncture is begun, affects the extent to which acupuncture is effective, and what the optimal time to begin acupuncture therapy would be. In addition, it is important to determine whether there is any benefit to initiating acupuncture treatment in stroke survivors who are well past the subacute stage, and who have apparently reached a plateau in their recovery.

Field-Initiated Projects (FIPs)
New York

Functional, Physiologic, and Immunologic Outcomes of Quantitative Progressive Exercise Rehabilitation of the Lower Extremities in Juvenile Arthritis: A Pilot Study

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Project Number: H133G70156
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $124,994; FY 98 $124,999; FY 99 $124,999
Abstract: This project determines the effects of muscle exercise rehabilitation on Juvenile Arthritis (JA) using quantitative measurement of functional, physiological, immunological, and biochemical outcomes of Quantitative Progressive Exercise Rehabilitation (QPER). JA is the most common of the rheumatic diseases affecting children; the disability that may result from this disease has a greater impact on lifestyle and quality of life in children than adults due to its early onset. Approximately 25 percent of all children with JA develop contractures and deformity, with 10 percent experiencing significant functional disabilities into adulthood. The goals of this project: (1) to determine the differences affecting the lower joints, between normal children and those with JA, with respect to their functional, physiologic, biochemical, and immunologic responses to exercise; (2) to evaluate the efficacy and effects of a previously published muscle exercise program developed in the laboratory, QPER with JA; and (3) to investigate the biochemical and immunologic changes occurring as a result of exercise testing and the QPER program. Assessment of the impact on disease activity, symptoms, and a variety of functional outcome parameters is planned following completion of the program and 12 months later.

Interventions to Improve Memory in Patients with Multiple Sclerosis

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Project Number: H133G990058
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 99 $147,304
Abstract: This project: (1) tests the efficacy of interventions, specifically targeting cognitive functioning, in patients with Multiple Sclerosis (MS); and (2) uses a novel outcome measurement that may be more sensitive and ecologically valid than existing measurements. The experiments determine the efficacy of donepezil therapy and glucose administration for enhancing memory functioning, two interventions that are extremely well-tolerated and have been demonstrated to be effective for improving memory and other aspects of cognitive functioning in several populations. Verbal memory is the most common area of impairment in people with MS, and therefore a verbal memory task is the primary outcome measure. Secondary outcome measures assessing other aspects of cognitive function (i.e., nonverbal memory, conceptual thinking, processing speed) may also be improved with intervention.

Detecting Incipient Skin Breakdown for People with Deeply Pigmented Skin

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Project Number: H133G50018
Start Date: October 1, 1995
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 95 $112,349; FY 96 $117,581; FY 97 $117,000; FY 98 (No-cost extension through 11/30/98); FY 99 (No-cost extension through 1/31/00)
Abstract: This study's objective is to develop techniques and instrumentation that permit early detection of skin trauma in darkly pigmented skin. People at risk for pressure sores regularly check for skin redness as a standard method to detect tissue distress. If persistent skin redness is detected, and its cause is removed, tissue breakdown can be prevented. However, for people with darkly pigmented skin at risk for tissue breakdown, this warning sign is attenuated or even completely shielded from view by melanin in the epidermis. With no effective alternative warning sign available, pressure damage in subjects with darkly pigmented skin is likely to be detected when it is more advanced and less reversible. Tasks include developing a valid analytical method of measuring erythema, and designing a simplified, portable spectrometer prototype that can be used to monitor skin clinically.

The Physiologic Basis of Functional Electrical Stimulation on Muscle Atrophy in Acute Spinal Cord Injury

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Project Number: H133G80100
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000

Abstract: This study characterizes the changes in muscle mass, morphology, and histochemistry in the first 6-7 months following acute spinal cord injury (SCI) and explores the impact of early reinstitution of muscle contraction on prevention of musculoskeletal atrophy. Muscle contractions are accomplished through the application of functional electrical stimulation (FES) induced cycle ergometry, but this study is not designed to develop FES technology. Rather it leads to a better understanding of the effect of FES-induced isotonic muscle contraction with dynamic force on the musculoskeletal changes known to occur after acute SCI. It also defines the dose-response relationship of FES-induced workloads on muscle mass and quality. Finally, the study begins to explore the mechanisms for the observed changes through characterization of both systemic growth hormone and insulin-like growth factors and local insulin like growth factor changes over the six-month FES cycle ergometry training program. A better understanding of the factors associated with the development of musculoskeletal atrophy occurring after acute spinal cord injury should lead to the development of better rehabilitation and pharmacologic interventions directed at preventing these secondary impairments of SCI.

Assessing the Impact of Managed Care on Rehabilitation Research

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Project Number: H133G70078
Start Date: May 1, 1997
Length: 24 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 97 $102,585; FY 98 $101,736; FY 99 (No-cost extension through 4/30/00)
Abstract: Little empirical data is available to document the extent to which research capacity in rehabilitation fields has been affected by managed care. This project gathers data used to assess managed care's impact on rehabilitation research capacity. Research findings are translated into recommendations for providing "substitute" support to sustain a research program that allows for optimal recovery from disabling illness and injury, and full participation of people with disabilities in all aspects of life.

A Non-Contact Wound Measurement System

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Project Number: H133G70103
Start Date: May 15, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000; FY 99 $125,000
Abstract: This project develops and clinically validates a noncontacting wound assessment technology. Clinical assessment of the healing status of wounds, particularly chronic wounds, is a laborious task that is often qualitative rather than quantitative. The new assessment is expected to measure wound surface area and volume and assess the status of the wound healing process by measuring the size of the granulation tissue border in the wound and by determining the percentage of the wound area that is red, yellow, or black. This information could be of value in assessing the efficacy of treatments and tracking the progress of a wound that is healing. The study involves designing and building a digital camera-based prototype measurement system that makes quantitative wound assessments without touching the wound. When the system is built, its accuracy is verified using models that represent wounds. After the accuracy of the system is established, a series of wounds is evaluated by different caregivers to assess the sensitivity of the system and its reproducibility.

Field-Initiated Projects (FIPs)
Virginia

Informed Prescription of Stimulant Drugs for ADHD: An Innovative Computer-Based Training Program

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Project Number: H133G50148
Start Date: July 1, 1995
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $124,058; FY 96 $124,058; FY 97 $124,252; FY 98 (No-cost extension through 6/30/99); FY 99 (No-cost extension through 5/31/00)

Abstract: Estimates suggest that more than three million children are affected with attention deficit/hyperactivity disorder (ADHD) and its related disturbances in school performance and social relationships. In determining the efficacy of a stimulant as an adjunct to treatment, single-subject, double-blind placebo, crossover studies can provide objective information. Yet, physicians have been reluctant to implement such trials because of perceived complexity, time constraints, and difficulties in analyzing and interpreting behavioral outcome data. This project overcomes these barriers by developing and field testing a new, simplified protocol for conducting such individualized trials of medication, such as Ritalin, in primary care settings. Components of the protocol include: (1) computer-accessible background material on ADHD for parents and professionals; (2) detailed instruction packets for parents, pharmacists, teachers, and physicians; and (3) an innovative computer data management system providing a clear summary of results in a format that facilitates decision making. Following field testing among physicians in practice and in training, the protocol (computer software) is disseminated nationally.

Technology for Access and Function

Rehabilitation, biomedical engineering, and assistive technology research has produced results that have helped people with disabilities to achieve and maintain maximum physical function, live in their own homes, attain gainful employment, and participate in and contribute to society. NIDRR's research addresses a broad range of technology, including systems of public technology, such as telecommunications and the built environment and orphan technology for individuals. The research program also encourages universal design practices.

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Applications of Technology to the Rehabilitation of Children with Orthopedic Disabilities

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Project Number: H133E50006
Start Date: November 1, 1995
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $594,339; FY 99 $611,370

Abstract: This RERC works to improve the rehabilitation of children with orthopedic disabilities through several research and development projects: body-powered hands for young children with below-elbow amputations, an improved mobile arm support for children with flaccid paralysis of the shoulder and elbow flexor muscles, and orthotic design innovations to overcome the inherent difficulties in bracing children with myelomeningocele. These innovations have wide application to children with spinal cord injury, muscular dystrophy, Guillain-Barre syndrome, and other diseases resulting in paresis or paralysis of the lower extremities. In addition, the project solicits input from children and family members about attitudes toward prosthetic and orthotic equipment, current systems of service delivery, and the cultural, ethnic, and socioeconomic factors that affect acceptance and use of assistive devices. A training project has been created to expose traditionally disadvantaged students to the field of rehabilitation engineering through seminars, lectures, design projects, and summer work fellowships. The RERC program conducts most research and development activities at Rancho Los Amigos Medical Center, with additional projects conducted at Shriner's Hospital in Los Angeles and Claremont Graduate School in Claremont California.

Smith-Kettlewell Rehabilitation Engineering Research Center

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Project Number: H133E50001
Start Date: June 1, 1995
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 95 $600,000; FY 96 $600,000; FY 97 $600,000; FY 98 $600,000; FY 99 $600,000
Abstract: This RERC develops and evaluates new technology and methods for infant vision screening, orientation and navigation, described video, access to products, displays and electronic information, deaf-blind communication, and other problems faced by people who are blind, have visual impairments, or have multisensory loss.

Rehabilitation Engineering Research Center on Telerehabilitation

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Project Number: H133E980025
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $890,000; FY 99 $900,000
Abstract: This project experiments with various models of telerehabilitation for strategic populations, engages in development activities that exploit promising technologies, and focuses on all aspects of the human-technology interface in a broad range of activities that benefit people with disabilities. Structured to include national resources with a strong focus on outreach and dissemination activities and a broad-based set of research activities, the Center focuses on: (1) Telehomecare: telesupport for stroke caregivers; (2) Telecoaching: enhancing job options; (3) Telemonitoring: passive sensing of functional performance and health parameters at home using unobtrusive instrumentation; (4) Teleassessment: remote evaluation of skin health and decubiti for people with SCI at rural hospitals and clinics using innovative technologies; (5) Telerehab Consumer Toolkit: outreach and development activities and products; (6) Home Telerehab: interactive systems for remote delivery of therapy, assessment, teaching and demonstration at home; (7) Telecounseling and Teleevaluation: remote psychological counseling and neuropsychological evaluation at rural clinics and homes; (8) Behavioral Virtual Reality: investigation and training of social and attending behaviors using virtual environment technology; (9) Teleplay: therapeutic play, including embedded teleassessment for children with disabilities; and (10) Integrating Telerehabilitation in Today's Health Care Marketplace. The Center also establishes National Resources activities: (1) Homecare and Telerehabilitation Technology Center; (2) Homecare and Telerehab Education/Training Center; (3) Virtual Library and Dissemination Center; (4) Standards, Codes and Electronic Patient Records (EPR); and (5) Telerehab Policy Information Center. The Center comprises three institutions: The Catholic University of America (CUA), the National Rehabilitation Hospital (NRH); and the Sister Kenny Institute (SKI).

Rehabilitation Engineering Research Center in Prosthetics and Orthotics

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Project Number: H133E980023
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000; FY 99 $900,000

Abstract: This Center designs improved prosthesis and orthosis components or systems using knowledge from research and engineering areas. Research activities include: (1) studying several issues of human walking; (2) creating a three-dimensional instrument, based on the Direct Ultrasound Ranging System, that is able to provide estimates of walking efficiencies and quality of walking, and that provides clinicians with many parameters in a simple way; (3) delivering data-gathering instruments and a validated prototype database for collection, storage, and processing short- and long-term information concerning outcomes of prosthetic and orthotic (P&O) fittings; (4) creating a prototype computer-based system to select the most appropriate P&O device for specific individuals; (5) developing a computer-based visualization aid that allows display of a person and their proposed prosthetic arms before the limbs are fabricated to assist with decision-making and fitting; (6) performing a number of "proof-of-concept" investigations and advancing the design of several P&O components and systems to technology transfer and utilization stages; (7) maintaining a high international profile, through a newsletter and through participation in the development of international standards in P&O; (8) providing educational and research opportunities for engineers, practitioners, and scientists in P&O; and (9) creating an advisory board that assists with research and development efforts and with the organization of the State-of-the-Science P&O conference. Information is disseminated through a Web site, the *Capabilities* newsletters, presentations, and journal articles.

Rehabilitation Engineering Research Center: Improved Technology Access for Land Mine Survivors

Physicians Against Land Mines
Center for International Rehabilitation
351 East Huron, Second Floor Annex
Chicago, IL 60611
h-casanova@nwu.edu
http://www.banmines.org

Principal Investigator: William Kennedy Smith, MD; Dudley S. Childress, PhD
Public Contact: Hector Casanova, Project Coordinator, 312/926-0030; Fax: 312/926-7662

Project Number: H133E980031
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $850,000; FY 99 $850,000

Abstract: This RERC is active in research, development, and demonstration; consumer surveys; education and training; utilization activities; technical assistance; and dissemination relating to improved technology access for land mine survivors. To accomplish these activities, the project: (1) maintains a consumer database and assessments of current prosthetic technologies; (2) develops or adapts technical advances in the design, production, and delivery of appropriate assistive devices; (3) designs and disseminates education, training, utilization, and outcome programs; (4) acts as a clearinghouse, providing researchers, educators, administrators, and funders access to resources that have been developed to facilitate service delivery to amputees in the United States and other countries; (5) disseminates information through an international newsletter and international journals, telecommunications, presentations at international meetings, training programs, consultations, open discussions, and other types of communication; and (6) develops and disseminates specific programs and products that address the needs of amputees and service providers in low-income countries where the vast majority of land mine survivors live. The RERC also establishes an Advisory Council that includes consumers and practitioners.

Rehabilitation Engineering Research Center for Ergonomic Solutions for Employment

University of Michigan
Center for Ergonomics
1205 Beal Avenue
Ann Arbor, MI 48109-1217
tja@umich.edu
http://umrerc.engin.umich.edu

Principal Investigator: Thomas J. Armstrong, PhD, 734/763-3742
Public Contact: Kelly Cormier, 734/615-2683; Fax: 734/764-3451

Project Number: H133E980007
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $800,000; FY 99 $800,000
Abstract: This Center combines ergonomic interventions, work and worksite modifications, assistive technologies, and medical interventions to facilitate placement of workers with disabilities, and helps prevent development of subsequent musculoskeletal illnesses and injuries. The Model System establishes a database to include information on a broad range of interventions and case examples as well as procedures for assessing workers, analyzing jobs, identifying accommodation needs, and selecting interventions, including ergonomic technologies. The comprehensive approach involving rehabilitation medicine and ergonomics culminates in a Web-based Model System that can be used by rehabilitation professionals, employers, consumers, and organizations.

Rehabilitation Engineering Research Center on Assistive Technology for Older Persons with Disabilities

State University of New York (SUNY) at Buffalo
Center for Assistive Technology
515 Kimball Tower
Buffalo, NY 14214
wmann@acsu.buffalo.edu
http://wings.buffalo.edu/ot/cat/rerca.htm

Principal Investigator: William C. Mann, PhD
Public Contact: Karen Duman, Information Coordinator, 800/628-2281 (V/TTY); Fax: 716/829-3217

Project Number: H133E60006
Start Date: September 1, 1996
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $500,000; FY 97 $500,000; FY 98 $500,000; FY 99 $500,000
Abstract: Activities of the RERC focus on research, assistive device development, education, and information relating to assistive technology for older people in the home and beyond the home. The projects of the RERC fall into four major areas: (1) research: ten projects address assessments in the home and community, issues for minority elders, highly problematic device categories, clinical trials of effectiveness, and managed care work issues; (2) device development: six projects address automobiles, obesity, mobility, balance, stairs, and public seating; (3) education: four projects address professional students, graduate students, and rehabilitation and aging service professionals; and (4) information: ten projects include a "Helpful Products" series of videos and booklets, training manuals, resources for hotel and motel guests, product information, national conferences, newsletter inserts, a World Wide Web site, monograph series, resource sourcebook, and a resource phone line.

Rehabilitation Engineering Research Center on Technology Transfer

State University of New York (SUNY) at Buffalo
Center for Assistive Technology
515 Kimball Tower
Buffalo, NY 14214
joelane@acsu.buffalo.edu
http://wings.buffalo.edu/ot/cat/rerc-t2.htm

Principal Investigator: Joseph Lane, MBPA
Public Contact: James Leahy, 716/829-3141 (V); 800/628-2281 (TTY); Fax: 716/829-3217

Project Number: H133E980024
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000; FY 99 $900,000
Abstract: This Center improves the quality of life for people with disabilities by: advancing the methods of technology transfer through research, transferring technologies into products through development, and facilitating the commercialization of new and improved assistive devices. These three outcomes are accomplished through collaborations with academic, industrial, consumer, and government stakeholders. The Center, a partnership of technical, marketing, and consumer expertise and networks: (1) conducts research on the technology transfer process as it is applied to the field of assistive technology, and develops, validates, and disseminates comprehensive models of technology transfer; (2) applies the research results by implementing the technology transfer process through a development program; (3) identifies and transfers breakthrough technologies to industry through a demand-pull model, transferring at least three technologies annually; (4) identifies and transfers useful new inventions to the marketplace through a supply-pull model, transferring three to five products annually; (5) delivers training, dissemination, and technical assistance programs to stakeholders in the field; and (6) develops an online technology transfer course as part of the University at Buffalo's distance education initiative. The dissemination program includes a state-of-the-practice conference and the development of a technology transfer program to be offered for presentation in year three. The Center functions as an intermediary and a catalyst, improving the process while expanding the network of stakeholders involved with the field. The end result: new and improved assistive technology products available in the marketplace that benefit professional service providers, family members, and people with disabilities.

Rehabilitation Engineering and Research Center (RERC) on Universal Design and the Built Environment at Buffalo

State University of New York (SUNY) at Buffalo
Department of Architecture
378 Hayes Hall
Buffalo, NY 14214
idea@ap.buffalo.edu
http://www.ap.buffalo.edu/~idea

Principal Investigator: Edward Steinfeld, ArchD
Public Contact: Assistant Director, 716/829-3485, ext. 329; Fax: 716/829-3861

Project Number: H133E990005
Start Date: November 1, 1999
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $599,976

Abstract: The RERC on Universal Design and the Built Environment promotes the adoption of universal design. The research program includes The Prototype Anthropometric Database Project, a research database on anthropometrics of wheelchair users and use of that database in ergonomic modeling software, and The Buildings in Use Project, that demonstrates the benefits of universal design by comparing the impact of buildings and elements with universal designs to buildings and elements that are not designed to be universally accessible. Product development efforts include development of prototypes for innovative universally designed products, evaluation & testing of these prototypes, and a Commercialization Package for each prototype to help bring it market. The Visitability Initiative, a training and action-research in 5 cities to develop visitability demonstration projects, is a collaboration with Concrete Change, a consumer advocacy organization focusing on making housing visitable for people with disabilities. The RERC's research program also include training, curriculum development, publication, technical assistance, and dissemination of universal design resources.

Rehabilitation Engineering Research Center on Hearing Enhancement and Assistive Devices

The Lexington School for the Deaf/Center for the Deaf
Research Division
30th Avenue and 75th Street
Jackson Heights, NY 11370
info@hearingresearch.org
http://www.hearingresearch.org

Principal Investigator: Harry Levitt, PhD; Matthew H. Bakke, PhD, 718/899-8800, ext. 3810
Public Contact: Lois O'Neil, Dissemination Coordinator, 718/899-8800, ext. 3203 (V/TTY); Fax: 718/899-3433

Project Number: H133E980010
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $900,000; FY 99 $900,000

Abstract: This RERC develops and evaluates technology to accommodate the needs of people with hearing loss, and disseminates related information in a form that is understandable to consumers, service providers, employers, and community leaders. These goals are accomplished by: (1) developing and evaluating improved, cost-effective technological aids for each of the target populations identified; (2) developing and evaluating instrumentation for detecting hearing loss at an early age; (3) providing improved access to modern telecommunications; (4) developing and evaluating specialized technology for community, home, and work environments; and (5) pursuing an active program of dissemination and training to ensure effective utilization of assistive technology.

Rehabilitation Engineering Research Centers (RERCs)
North Carolina

Rehabilitation Engineering Research Center on Communication Enhancement in the New Millennium

Duke University
Department of Surgery
Division of Speech Pathology and Audiology
Duke University Medical Center, Box 3888
Durham, NC 27710
aac-rerc@mc.duke.edu
http://aac-rerc.com

Principal Investigator: Frank DeRuyter, PhD
Public Contact: Kevin Caves, BSME, ATP, 919/681-9983; Fax: 919/681-9984

Project Number: H133E980026
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $899,996; FY 99 $899,990

Abstract: This project uses innovative communications technologies to benefit researchers, engineers, rehabilitation service providers, developers, and users of AAC technologies. The project: (1) investigates attitudinal barriers toward technology use by elderly people with communication disorders, their listeners, and service providers; (2) studies the organizational strategies of adult AAC users to determine if preferences are predictive of performance using AAC; (3) studies how to improve AAC technologies for young children with significant communication disorders by evaluating learning demands and functional performance (also involves development of design specifications); (4) evaluates and enhances communication rate efficiency and effectiveness through the development of procedures and software technology that simulates and measures the performance of AAC technologies; (5) identifies barriers to employment, describes strategies to overcome them, documents design specifications for AAC technologies, and describes action plans to achieve successful employment outcomes; (6) increases employment opportunities for graduates of an employment and AAC program; and (7) develops a coordinated program that monitors and seeks out technology developments in both commercial form and prerelease development stages that affect the engineering and clinical AAC field.

Rehabilitation Engineering Research Center (RERC) on Universal Design and the Built Environment

North Carolina State University
Center for Universal Design
219 Oberlin Road
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Raleigh, NC 27695-8613
cud@ncsu.edu
http://www.design.ncsu.edu/cud

Principal Investigator: Lawrence H. Trachtman; Molly Story, 919/515-3082
Public Contact: Andrea Gabriel, 800/647-6777 (V/TTY, information requests only); 919/515-8547 (V/TTY); Fax: 919/515-3023

Project Number: H133E990002
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $399,988
Abstract: The purpose of the Rehabilitation Engineering Research Center (RERC) on Universal Design and the Built Environment is to improve the accessibility and usability of the built environment, and advance the field of universal design. The goals of the project are to: (1) increase knowledge of the complex and dynamic relationship between the individual and the environment, including knowledge of what design features, details and arrangements optimize the accessibility and usability of the built environment for the widest diversity of users; (2) increase the adoption and improve the practice of universal design by the building and product manufacturing industries; (3) increase inclusion of the universal design approach in post-secondary design curricula, and increase the number of designers and researchers trained in universal design practices; and (4) increase awareness of and stimulate demand for universal design among builders, manufacturers, designers, human service professionals, and individuals with disabilities and their families.

Rehabilitation Engineering Research Center on Wheeled Mobility

University of Pittsburgh
School of Health and Rehabilitation Sciences
Rehabilitation Technology Program (RTP)
Forbes Tower, Suite 5044
Pittsburgh, PA 15260
dhobson@pitt.edu
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Principal Investigator: Douglas A. Hobson, PhD; Clifford Brubaker, PhD
Public Contact: 412/647-1273 (V); 412/647-1291 (TTY); Fax: 412/647-1277

Project Number: H133E990001
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000; FY 99 $900,000
Abstract: The RERC on Wheeled Mobility investigates the use of dynamic seating for reducing spasicity, and enhancing seating comfort; investigates the biomechanical characteristics of soft tissue related to the risk of developing pressure ulcers, and the relationship between pressure measurements and pressure ulcer incidence; develops and validates the use of outcomes measures for seating and mobility intervention; and investigates the use of the World Wide Web as a seating decision support tool for consumers. This project also develops and evaluates a comparative data source for use in decision support of wheelchair selection; an interface for integrating external devices with powered wheelchairs; wheelchair seating standards; standardized postural measures; injury prevention wheelchair technologies; and enhanced controls for powered wheelchairs.

Rehabilitation Engineering Research Center on Information Technology Access

University of Wisconsin/Madison
Trace Research and Development Center
5901 Research Park Boulevard
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Principal Investigator: Gregg C. Vanderheiden, PhD, 608/263-5788
Public Contact: Kate Vanderheiden, Program Manager, 608/262-6966 (V); 608/263-5408 (TTY); Fax: 608/262-8848

Project Number: H133E980008
Start Date: June 12, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $1,350,000; FY 99 $1,350,000

Abstract: This RERC improves access by individuals with all types, degrees, and combinations of disabilities to a wide range of technologies, including computers, ATMs, kiosks, point-of-sale devices and smartcards, home and pocket information appliances, Internet technologies (XML, XSL, CSS, SMIL, etc.), intranets, and 3-D and immersive environments. As one component in a larger system of consumers, researchers, industry, and policy and public agencies, the Trace Center's program is designed to work within the existing structure, supporting other components, and coordinating its efforts to address the functioning of the whole. The program identifies strategies that can be used by industry to broaden the user base for their standard products, so individuals with as broad a range of abilities as possible are able to use standard products directly. Further, the Center targets specific compatibility and interconnection standards work to ensure that people who cannot use products directly are able to operate them using assistive technologies. The Center focuses on the use of targeted projects and collaboration, both national and international, to carry out the research, development, information dissemination, training, and standard-setting activities required. The approach is intended to be flexible, forward-looking, and broad in scope, yet focused on key access issues as defined by its consumer constituency and its research programs.

Rehabilitation Engineering Research Center on Telecommunication Access

University of Wisconsin
Trace Center, College of Engineering
5901 Research Park Boulevard, Suite 200
Madison, WI 53719-1252
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Principal Investigator: Gregg C. Vanderheiden, PhD (Trace); Judy Harkins, PhD (Gallaudet University), 608/263-5788 (Trace); 202/561-5257 (Gallaudet)
Public Contact: Ben Caldwell, 608/263-1156; Fax: 608/262-8848

Project Number: H133E990006
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $675,000

Abstract: The focus of this Center is to identify telecommunication access barriers in current and future technologies, work with others in the field to identify solution strategies, test them, implement any necessary standards, and assist industry in transferring the ideas into their commercial products. The primary areas of activity of the Center are: (1) research; (2) applied research and development; (3) transfer and technical assistance; and (4) dissemination, education, and outreach. Technologies being addressed include: customer premises equipment (CPE) of all types (phones, video phones, pagers, messaging system, etc.); telecommunication systems and services (voice mail, interactive voice response systems, etc.); network topologies; telecommunications standards; and next-generation multimedia telecommunication systems (telecollaboration, virtual meetings, etc.). The primary focus is on making these systems directly usable by people with all types and degrees of disability. It also includes ensuring compatibility with assistive technologies such as TTY's, assistive listening devices, alternative input devices, and devices with alternative displays.

Understanding and Increasing the Adoption of Universal Design in Product Design

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Principal Investigator: Gregg C. Vanderheiden, PhD, 608/263-5788
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Project Number: H133A60030
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 96 $250,000; FY 97 $250,000; FY 98 $250,000; FY 99 (No-cost extension through 9/30/00)
Abstract: This project identifies the factors that cause industry to practice, or not to practice, universal design of products, and identifies ways people outside companies can encourage and facilitate the practice of universal design of products on a more widespread basis. The project brings together experts who have been active in universal design from across the technology spectrum to work with industry in addressing these questions. Areas of expertise include housing and architecture, computers and electronic products, media and materials, telecommunications, and educational software.

Field-Initiated Projects (FIPs)
California

Powered Mobility and Young Children with Disabilities: A Multicenter Trial to Determine the Cognitive and Coping Factors That Predict Wheelchair Skill Level

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Rehabilitation Engineering Program
7503 Bonita Street - Bonita Hall
Downey, CA 90242
donitatefft@ranchorep.org
http://www.ranchorep.org/pm

Principal Investigator: Donald McNeal, PhD
Public Contact: Beatriz Weber, MBA, Program Coordinator, 562/401-7994 (V); 562/803-4533 (TTY); Fax: 562/803-6117

Project Number: H133G60183
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 96 $124,958; FY 97 $124,973; FY 98 $124,958; FY 99 (No-cost extension through 8/31/00)

Abstract: This project validates, in a multicenter trial, a newly developed cognitive assessment battery for predicting a young child's readiness for powered mobility. This is important because research in developmental psychology asserts that the ability to move about independently is critical to a child's development of cognitive, social, and communication skills. Young children who are unable to move independently are at risk for development delays. Due to limited availability of clinical assessment instruments, it is often difficult to determine when a young child with mobility impairments may be developmentally ready to operate a powered wheelchair. In addition, the project expands the predictive power of this assessment instrument by adding a component to assess coping skill (e.g., persistence, distractibility, etc.) and to explore the applicability of this battery with a new population of children (i.e., those with cerebral palsy).

Development of a Transitional Ortho-Therapeutic Walker (TOTWalker) for Preschool Children with Physical Disabilities

Lucile Packard Children's Hospitals at Stanford
Rehabilitation Technology and Therapy Center
1010 Corporation Way
Palo Alto, CA 94303-4304
re.czw@lcph.stanford.edu
http://www-med.stanford.edu/lpch/rec

Principal Investigator: Christine Wright, MPA, OTR
Public Contact: 650/237-9200; Fax: 650/237-9204

Project Number: H133G990103
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $149,941
Abstract: This project develops and evaluates a new and innovative support walker that allows children with physical disabilities to maneuver in the indoor environments of home and school and to approach people and manipulate objects. The Transitional Ortho-Therapeutic Walker (TOTWalker) is designed primarily for children with cerebral palsy, traumatic brain injury, or developmental delay, who are 12 months to 5 years of age and who have no means for self-directed, upright mobility. The TOTWalker provides a highly maneuverable and efficient means for achieving indoor mobility. It also provides an efficient means for achieving mobility as measured by distance and speed of travel, and increases a child's accessibility to the environment.

Field Initiated Projects (FIPs)
California

Optimizing Assistive Technology Service with Video Teleconferencing

Lucile Packard Children's Hospitals at Stanford
Rehabilitation Technology and Therapy Center
1010 Corporation Way
Palo Alto, CA 94303-4304
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Principal Investigator: Judy Henderson
Public Contact: 650/237-9200; Fax: 650/237-9204

Project Number: H133G990087
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $150,000
Abstract: This project develops an interactive video teleconferencing (VTC) protocol to provide expert assistive technology (AT) evaluations to individuals with significant physical and speech disabilities and their local support teams, living in rural or underserved areas. The VTC protocol includes methods, equipment, and materials specific to the provision of augmentative communication, environmental control, and computer access evaluations to improve independent functioning in daily living, academic settings, employment, and leisure activities. The VTC protocol is developed during video teleconferencing evaluations by a specialized team with extensive experience in these types of AT.

Spatial Hearing with Laboratory-Based Hearing Aids

Smith-Kettlewell Eye Research Institute
2232 Webster Street
San Francisco, CA 94115
helen@ski.org
http://www.ski.org/HJSimon_lab

Principal Investigator: Helen J. Simon, PhD
Public Contact: 415/345-2071; Fax: 415/561-1610

Project Number: H133G70107
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000; FY 99 $125,000

Abstract: Since conventional binaural hearing aids do not satisfactorily solve the problem of speech perception in noise, a long-term goal of the Smith-Kettlewell Eye Research Institute is to develop a better binaural hearing aid (HA). This project's hypothesis suggests that a binaural perceptual balance of Interaural Intensity Difference (IID) and Interaural Time Delay (ITD) across frequencies is required to restore optimum localization and speech intelligibility by eliminating or lessening exaggerated dominance consequent to asymmetric hearing loss. Aberrations of either or both IID and ITD at different frequencies would impair directional localization and, therefore, speech intelligibility in noise.

A Refreshable Braille/Tactile Graphics Display for Human-Computer Interaction

The Smith-Kettlewell Eye Research Institute
2138 Fillmore Street
San Francisco, CA 94115
brabyn@skivs.ski.org
http://www.ski.org

Principal Investigator: John A. Brabyn, PhD
Public Contact: 415/345-2100; Fax: 415/345-8455

Project Number: H133G990049
Start Date: April 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $149,998

Abstract: This project explores and evaluates a new concept for an electronically refreshable Braille/tactile graphics display for people who are blind. The goal is to allow manufacturing costs an order of magnitude less than existing displays, and ready expansion to a full page of Braille or tactile graphics. The concept is based on heat-induced fluid phase changes to form a design with minimal moving parts that lends itself to manufacture in arrays containing many dots rather than assembling one dot at a time. Advantages include very low cost, the ability to assemble entire arrays in one step, low power needs, physical compactness, easy expansion to a full page display, and reliance on proven materials. The goals are to: (1) investigate appropriate materials and processes; (2) fabricate and test a prototype with at least 20 Braille cells (a larger two dimensional array if time permits); and (3) conduct user testing to establish design parameters, user acceptability, speed, and comfort.

Optimizing the Conditions for Reading with the Periphery of the Visual Field

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The Smith-Kettlewell Eye Research Institute
2318 Fillmore Street
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http://www.skeri.org/rerc/mackeben

Principal Investigator: Manfred Mackeben, PhD
Public Contact: 415/345-2112; Fax: 415/345-4855

Project Number: H133G990003
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $150,000
Abstract: This project studies the parameters for optimal letter and word recognition using the periphery instead of the center of the retina, in people with central (foveal) vision loss. The results are used to develop a computer program that optimizes reading off a screen after foveal vision loss. The project uses computer displays for presentation because they allow changing the display mode and typeface instantaneously. Font creation software is used to modify characteristics of often-confused letters, using an objective measure of salience, and the effect can be tested immediately. This optimizes typefaces for viewing with the peripheral retina. If it improves peripheral reading from a screen, the product is made available for printing on paper.

Personalized Synthetic Speech Using ModelTalker: Development and *Evaluation*

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Wilmington, DE 19899
bunnell@asel.udel.edu
http://www.asel.udel.edu/speech

Principal Investigator: H. Timothy Bunnell, PhD
Public Contact: 302/651-6835; Fax: 302/651-6895

Project Number: H133G990182
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $150,000

Abstract: This project allows a sample group of consumers with ALS to capture their own voice for use in an experimental AAC device called ModelTalker. The new "corpus-based" speech synthesizer will be capable of capturing voices and producing speech that can range in quality from that of recorded natural speech to high quality synthetic speech and produce synthetic speech that can sound like the individual, and can additionally "play back" utterances that were not actually recorded, but have been constructed (synthesized) from bits of recorded speech. The project goals are: (1) to improve the voice capture procedures for creating personalized voices; (2) to modify aspects of the synthesis and voice capture software to make them more user friendly; (3) to prepare documentation and tutorial materials to allow people who are not speech scientists to prepare their own personalized voices; and (4) to evaluate the voice capture procedures and the synthesizer itself with one population of people who can benefit (people with ALS). The project is developing an optimal list of utterances for talkers to record for ModelTalker, a list that is as short as possible without compromising the quality of the resulting synthetic speech. Once the list is optimized, the output from ModelTalker is compared to other synthesizers commonly used in AAC devices. Based on the results of this evaluation, the list, the ModelTalker, or both are modified as needed.

Specifying the Facilitative Effects of Animation on the Understanding of Action Word Representatives

Center for Applied Science and Engineering
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1600 Rockland Road
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Wilmington, DE 19899
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Principal Investigator: Beth A. Mineo Mollica, PhD, 302/651-6836
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Project Number: H133G990115
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $149,964

Abstract: Using a customized computer-based assessment protocol, this project examines the differential ability of several types of graphics (static and animated) to convey the meaning of action word representations. Picture-based language representations afford access to augmentative and alternative communication (AAC) options for many individuals who otherwise would be unable to benefit from communication enhancement approaches. Some new products in the AAC marketplace offer consumers the feature of animation. While it has been presumed that animation would make the meaning of verb representations more salient, this position has not been proven, and it may in fact be the case that the complexity of the linguistic task is affected by the complexity of the representation. Six varied representational types are investigated with children with typical development, children with disabilities, adults with developmental disabilities, and adults with acquired cognitive disabilities. Further, the investigators attempt to determine which characteristics of action representation positively affect performance.

Telerehabilitation to Support Assistive Technology

Shepherd Center, Inc.
2020 Peachtree Road Northwest
Atlanta, GA 30309
mike_jones@shepherd.org
http://www.shepherd.org/telemed

Principal Investigator: Michael L. Jones, PhD
Public Contact: 404/350-7595; Fax: 404/350-7596

Project Number: H133G990133
Start Date: May 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $149,985

Abstract: This project explores the application of telerehabilitation to support assistive technology (AT) and assistive technology services, implementing three activities that involve development and testing of new methods and devices. The first component examines telerehabilitation to provide training in the use of augmentative communication systems to individuals with significant physical and speech disabilities. The second component explores the use of telecommunications technology by seating and mobility specialists to provide follow-up consultation and verify set-up and use of new wheelchairs. If successful, this approach permits follow-up with consumers who cannot return to the clinic for a follow-up clinic visit. The third component investigates the use of videoconferencing technology to complete accessibility assessments in remote locations.

Development of a Rehabilitator for Arm Therapy After Brain Injury

Rehabilitation Institute Research Corporation
Sensory Motor Performance Program
345 East Superior Street
Chicago, IL 60611
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http://www.eng.uci.edu/~dreinken/djr.htm

Principal Investigator: David Reinkensmeyer, PhD
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Project Number: H133G80052
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $124,117; FY 99 $122,181
Abstract: This project develops a self-therapy rehabilitator for the arm after hemiplegic stroke and other types of brain injury to correct the current lack of appropriate technology. The device, called the "Assisted Rehabilitation and Measurement (ARM) Guide," implements a common manual therapy technique, active assistance for reaching movements. In addition, the ARM Guide is designed to provide visual feedback of guidance forces to the user during assisted reaching. Dr. Reinkensmeyer can be reached at the Department of Mechanical and Aerospace Engineering, 4200 Engineering Gateway, University of California, Irvine, Irvine, CA 92697-3975.

Neuromuscular Reorganization to Improve the Control of Artificial Limbs

Rehabilitation Institute Research Corporation
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Principal Investigator: Todd A. Kuiken, MD, PhD
Public Contact: 312/238-8072; Fax: 312/503-0401

Project Number: H133G990074
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $149,900

Abstract: This project is concerned with improving myoelectric control of powered prostheses using nerve-muscle grafts. Currently, people with upper limb amputations can only control one joint at a time with myoelectric prostheses. By grafting the residual nerve endings to muscles in or near an amputated limb, it may be possible to produce additional, independent surface electromyographic (EMG) signals. The muscle would essentially be used as a biological amplifier of the nerve signals. These additional myoelectric signals could be used to control multiple joints simultaneously in externally powered prostheses. This approach has great potential for improving the functional use of upper limb prostheses.

Training Material for Blind Computer Users

Iowa Department for the Blind
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Principal Investigator: Karen A. Keninger, MA
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Project Number: H133G990195
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 99 $149,997

Abstract: This project develops appropriate training materials in alternative media for computer users who are blind, and develops a self-sustaining mechanism to continue the production of independent, high-quality training material. Objectives include: (1) research, develop, evaluate, and produce 30 training packages in alternative media, each of which addresses a specific combination of screen reader and application; (2) develop, evaluate, document, and implement five marketing strategies for dissemination of training products; (3) develop a procedures manual detailing the strategies, procedures and operations used to develop, produce, and market training packages; (4) develop a viable business plan for the enterprise based on research and market experience; and (5) locate appropriate individuals and/or existing entities interested in taking over the project. As computer hardware and software continue to evolve, computer users with visual impairments need accessible and appropriate training material in order to keep up with the changes and remain competitive in school, at work, and in their communities. This project ensures a continuing enterprise over the long run to meet this critical need for appropriate training material.

Field-Initiated Projects (FIPs)
Kansas

Knowledge Dissemination for Vision Screeners

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Project Number: H133G60140
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 96 $126,548; FY 97 $124,613; FY 98 $124,613; FY 99 (No-cost extension through 8/31/00)
Abstract: This project increases the quantity and quality of vision services available nationally to infants, toddlers, preschoolers, and older people with disabilities by disseminating an interactive CD-ROM program to providers of vision screening and evaluation services. The program also provides a model for using CD-ROM to disseminate "knowledge on demand" that can be readily delivered in a variety of settings. The model addresses the training needs of a variety of personnel regarding traditional vision screening services to people who are sometimes considered difficult to test, and as a consequence, often do not receive traditional vision screening services. The CD-ROM program is modeled after the "knowledge on demand" technology used in industry.

Field-Initiated Projects (FIPs)
Kentucky

Development and Commercial Transfer of a Tactile Image Printer (TIP)

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Principal Investigator: T. V. Cranmer, PhD
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Project Number: H133G80103
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: The project designs a product that allows students, educators, and other professionals who are blind to access a variety of graphic material such as computer screens, maps, schematics, geometry tables, organizational charts, flow charts, and line drawings. Researchers develop a device that produces sharper, better-defined tactile images and includes lines and filled-in areas of varying dimensions and textures. Colors can also be produced as needed or as appropriate. Developers include the inventor, engineers, educators, publishers, and grassroots advocacy organizations, with support from three Rehabilitation Research Engineering Centers, those on Information Access (Trace), Blindness and Visual Impairment (Smith-Kettlewell), and Technology Transfer (SUNY/Buffalo). The device should help people who are blind or who have visual impairments to become active participants in the new global economy. Phases of the project include firmware development, experimentation and testing, creation and testing of graphic material, and product and information dissemination.

Field-Initiated Projects (FIPs)
Massachusetts

Closed Captioning and Audio Description: Development and Testing for Access to Digital Television

WGBH Educational Foundation
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Boston, MA 02134
ncam@wgbh.org
http://www.wgbh.org/ncam

Principal Investigator: Larry R. Goldberg
Public Contact: Gerry Field, 617/300-3496; Fax: 617/300-3496

Project Number: H133G80050
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $125,000; FY 99 $125,000

Abstract: This project addresses the urgent, time-sensitive need to improve the effectiveness of Digital Television (DTV) to deliver high-quality captioning and description services to people with hearing or visual impairments. Digital Television (DTV) is a complete redesign of North America's television service, featuring a digital signal, a sharper picture, an aspect ratio resembling that of a wide-screen movie, multiple CD-quality audio channels, and ancillary data services. This project uses knowledge and understanding gained from research and development previously undertaken by the WGBH Educational Foundation (among others) to design and develop prototype DTV captioning and description processes. Project objectives are: (1) to develop and disseminate a *standard* data file that tests DTV systems for quality and accuracy in handling DTV captions and descriptions as they are encoded, transmitted, and decoded in accordance with accepted standards and official *minimum requirements;* (2) to develop and disseminate an *advanced-features* data file that tests DTV systems for quality and accuracy in handling DTV captions and descriptions as they are encoded, transmitted, and decoded in accordance with accepted standards and with a full *range of advanced features;* and (3) to evaluate the effectiveness of DTV receivers in decoding DTV captions and descriptions and to measure implementation of advanced features.

Access to Convergent Media

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Principal Investigator: Larry R. Goldberg
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Project Number: H133G990105
Start Date: August 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $150,000
Abstract: This project attemps to make it possible for people who are blind or who have visual impairments to use convergent media effectively, by influencing industry standards and developing new media delivery technologies. "Convergent media" refers to programming and services growing out of the intersection of broadcast and cable television, digital television, PC, and Internet technologies. The project objectives are: (1) to propose and develop standard approaches to tag, parse, and present data so that electronic program guides and advanced services are accessible; (2) to develop software/hardware specifications for a prototype system or systems, that enables orientation, navigation, and feedback when using electronic program guides; (3) to collaborate on development of the prototype access system and integrate it into an alpha advanced cable set-top box; and (4) to identify barriers to using convergent media, outline solutions, and suggest methods for carrying out such solutions.

Field-Initiated Projects (FIPs)
Massachusetts

Speaking to Write: Realizing the Potential of Speech Recognition for Secondary Students with Disabilities

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Family, School, and Community
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Newton, MA 02158-1060
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http://www.edc.org/spk2wrt

Principal Investigator: Patricia Corley; Robert Follansbee
Public Contact: 617/969-7100, ext. 2716; Fax: 617/969-3440

Project Number: H133G70143
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $124,995; FY 98 $125,000; FY 99 $124,993
Abstract: This project helps secondary students with cognitive and physical disabilities to become successful writers by using voice recognition technology. The project plans to develop, pilot, publish, and market the following set of products: (1) adaptations to voice recognition systems that make them more accessible to secondary students with physical or learning disabilities; (2) tools that help educators and parents understand the demands of voice recognition for secondary students with disabilities; (3) revised training protocols and materials that are tailored to the needs of secondary students with disabilities; and (4) tools that help educators integrate voice recognition technology into meaningful instructional activities. Project partners are the Education Development Center, Inc. (EDC), and the Communication Enhancement Center at Children's Hospital in Boston.

Direct Brain Interface for Control of Assistance Technology

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Physical Medicine and Rehabilitation
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Principal Investigator: Simon Levine
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Project Number: H133G70120
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $124,993; FY 98 $124,971; FY 99 $124,933
Abstract: Most assistive technology interfaces are operated by some form of physical movement; however, many people could benefit from an interface that does not require physical movement and instead accepts commands directly from the brain. This research explores the detection and use of event-related potentials (ERP's) intracranially recorded from subdural electrodes to demonstrate the feasibility of a direct brain interface for people with disabilities. In this study a direct brain interface is defined as an interface that accepts signals directly from the brain and requires no physical movement. Work in this project is limited to signals arising from voluntary cognitive activity as opposed to those evoked through external stimuli.

A Direction Finding, Beam Forming (DF-BF) Conference Microphone System

The Lexington School for the Deaf/Center for the Deaf
Research Division
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Principal Investigator: Matthew H. Bakke, PhD
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Project Number: H133G70122
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000; FY 99 $125,000

Abstract: This project develops and evaluates a conference microphone system that is intended to provide improved speech intelligibility in noisy and reverberant environments for people who are hard of hearing. The microphone system also improves the accuracy of computer-assisted speech transcription systems for people who are deaf. The system uses digital array processing techniques to perform two discrete functions: (1) determine talker direction within a given angular resolution; and (2) aim a superdirectional beam pattern at that talker. In instances where more than one person is speaking at the same time, the system has the ability to activate more than one directional pattern, or alternatively receive sound from all directions until one talker has taken the floor. Although this device is designed specifically for people who have hearing loss, it also offers advantages to the general population, particularly when used in teleconferencing.

Optimizing Posture, Trunk Control, and Reach of Wheelchair Users

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Principal Investigator: Stephen H. Sprigle, PhD, PT
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Project Number: H133G990048
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $149,489
Abstract: The study's objective is to improve function via better postural support by developing clinical guidelines and prototype devices that accommodate to the varying needs for trunk stability and mobility throughout the day. To meet this objective, the study has two aims: (1) to determine the effects of posture and postural supports (cushion, backrest height and supports) on the trunk control and upper extremity function of wheelchair users, and (2) to determine if optimizing back height and cushion type permit people to sit with an erect posture without hindering function. For wheelchair users, balancing sufficient trunk support with adequate trunk mobility has important functional and medical consequences. Better understanding of the posture-function relationship and improved design concepts are needed to improve trunk control of wheelchair users. Improved control permits stability during activities of daily living while not hindering function by restricting mobility.

Field Initiated Projects (FIPs)
North Carolina

Geographic Information System Community Resource Mapping

Orelena Hawks Puckett Institute
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Principal Investigator: Carl Dunst, PhD
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Project Number: H133G990132
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 99 $149,755
Abstract: This project develops and evaluates the use of Geographic Information System (GIS) mapping technology as an information management system for promoting the flow of services, resources, and supports to individuals with disabilities and their families. It studies the methods practitioners, families, and individuals with disabilities can use to identify the individuals, programs, organizations, etc., that constitute sources of supports and resources in the community. The GIS System is developed in a user-friendly and community specific format that matches the ways in which families think about community resources.

Field-Initiated Projects (FIPs)
North Carolina

Promoting the Practice of Universal Design

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Center for Universal Design
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Principal Investigator: Molly Story
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Project Number: H133G80060
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $124,970; FY 99 $124,955
Abstract: This project promotes the practice of universal design by developing and implementing a self-supporting product design evaluation and marketing program that responds to consumer and industry needs. Universal design is the design of products and environments that are usable, to the greatest extent possible, by everyone regardless of their age or ability. The critical next step toward increasing the practice of universal design is adoption and application of its principles both by consumers and by industry. The three objectives of this project are to improve consumers' ability to recognize universal design, to improve designers' ability to meet the needs of a diverse consumer base, and to recognize and support industry efforts to market universal design successfully. Ways these objectives are achieved through this project include: (1) developing a set of performance measures that reflect the Principles of Universal Design; (2) confirming the reliability of these measures and pilot testing the evaluation program; (3) developing a plan of self-support for the universal design evaluation program; and (4) disseminating the results to appropriate audiences. The project develops a sound universal design program based on information gathered directly from future users—consumers, designers, and marketers—as well as the universal design research community.

Accessibility of Personal Computers for Adults with Significant Cognitive Disabilities: Development and Field-Testing of Assistive Software for Personal Management

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Principal Investigator: Thomas Keating, PhD
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Project Number: H133G80095
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $124,983; FY 99 $124,979

Abstract: This project develops and field tests a graphically driven software application to augment the ability of users with cognitive disabilities to schedule and manage personal activities. As conceived, the software can also serve as a cognitively accessible gateway for other functions, such as finding out about and scheduling community events, managing a personal budget, communicating and coordinating activities with friends, and performing household tasks. The application design is based on pilot work with adolescents and employs a graphic interface that guides users through the metacognitive choices implicit in detailing and scheduling activities. This involves deciding what activity to schedule when, who is doing it, how much money is needed, where it is happening, how to get there, what to bring, and what to wear. For each of these decisions, the user is presented with a grid of graphic representations, each of which is some combination of personalized photo image, symbol, text, and sound. By selecting from the images represented for each aspect of activity planning, the user constructs an entire activity and can print out and carry a personal daily schedule with detailed reminders. Approximately 50 adults with significant cognitive disabilities are involved with the project.

The Mentor Project: Exemplary Practices for Developing Supportive Mentor-Protégè Relationships via the Internet for People with Significant Physical and Speech Disabilities

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Principal Investigator: Janice Light, PhD
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Project Number: H133G80044
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 98 $124,806; FY 99 $124,887

Abstract: This project addresses two critical needs: it responds to the needs of people with a combination of significant physical and speech disabilities, including those who are members of traditionally underrepresented groups; and it investigates the use of teleconferencing technology to provide disability-related services. People with physical and speech disabilities confront significant barriers in their drive to maximize educational and vocational achievement, inclusion in society, self-sufficiency, and the overall quality of their lives. The project provides constituents with regular access to competent mentors with similar disabilities who can provide encouragement, collaborative problem-solving, and information about disability-related resources. These problems are particularly acute for adolescents and young adults, especially those who reside in rural areas or who are members of ethnic and racial minorities. Activities include: (1) investigating the effect of a leadership training program, delivered via the Internet, on the acquisition, generalization, and maintenance of problem-solving strategies and mentoring skills by 30 adults with physical and speech disabilities; (2) investigating the effect of a similar mentor program for 30 adolescents and young adults who have physical and speech disabilities, as well as the effect on their successful attainment of individualized educational, vocational, social, and personal goals; and (3) developing, evaluating, and disseminating resource materials documenting exemplary practices for the implementation and evaluation of effective mentoring programs to be used by people with disabilities, their families, and rehabilitation professionals. Consumers with disabilities are integrally involved in planning, implementation, evaluation, and dissemination activities of the project.

Novel Prosthetic Foot Design Method to Improve Metabolic Efficiency of BK Amputee Gait

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Project Number: H133G70038
Start Date: May 1, 1997
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 97 $121,550; FY 98 $125,000; FY 99 $125,000

Abstract: This investigation examines the concept that to use a prosthesis optimally, energy must be stored and released over the proper time interval to meet kinetic requirements of gait. Despite recent improvements in the materials used to construct lower limb prostheses, further improvements in prosthetic foot design could result in increased function, endurance, improved vocational and recreational opportunities, and improved quality of life for people with below-knee amputations. The intent of this research is to test the hypothesis that the metabolic cost of ambulation is minimized in people with below knee amputations wearing energy restoring prostheses, when the driving frequency of oscillation (dictated by ambulation speed) matches the resonant frequency of the prosthesis (dictated by prosthesis stiffness and user mass). The hypothesis can be described another way: when the foot contact time on the ground (dictated by ambulation speed) matches the time period over which the prosthesis compresses and extends when it is allowed to do so in a natural or unrestrained fashion (i.e., at resonance), the energy cost is minimized. The long-term objectives of this study are to provide a rational basis for the design of energy-storing lower limb prostheses and to improve the function of people with lower limb amputations through increased metabolic efficiency of ambulation.

Small Business Innovative Research (SBIR Phase I)

Connecticut

CyberSlate Computer-Guided Coaching to Achieve Reading Fluency

The Learning Incentive
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Project Number: ED-99-PO-4696
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000

Abstract: This project increases the sophistication of both the software and the educational intervention strategies of basic skills assistance technology developed by The Learning Initiative (TLI). TLI has developed a prototype computer support system that helps teachers select the correct intervention and maintain a pace that ensures motivation and learning. Through the Internet, parts of this prototype have been tested with parents and teachers in remote locations with excellent results. Recent research findings indicate that as many as 40 percent of US citizens can be classified as having reading disabilities. Although powerful technologies for overcoming reading disabilities have been available for some time, these strategies have been difficult to implement, because of their complexity and labor-intensive demands. The technologies require a combination of phonological discrimination training, direct instruction of phonics, fluency building, and continuous application with a demand for comprehension. The computer support system helps address the fluency building component.

Small Business Innovative Research (SBIR Phase I)
Florida

Virtual Internet-Based Sign Language Teaching Assistant (VISTA): The Visual Talker: Real-Time Speech-to-Text Visual Translator System for Classroom Environments

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Principal Investigator: Ben-z Lawrence
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Project Number: ED-99-PO-4644
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,862

Abstract: This project determines the requirements for a Virtual Internet-based Sign Language Teaching Assistant (VISTA). A VISTA system consists of an Instructor Instrumentation Station (I2S), and an unlimited number of Student Multimedia PCs (SMPC). The I2S uses a state-of-the-art optical tracking system to track finger, hand, arm, and facial movements to provide real-time position information. The position information is translated into industry standard Virtual Reality Modeling Language (VRML). Audio from a microphone or other source is digitized and compressed using a standard streaming audio format. Both the VRML and audio data are broadcast via the Internet to student PCs. A virtual instructor performing the motions of the trainer is shown with instructional audio while student audio is sent concurrently to the I2S. VISTA can provide remote conversational and interpreter sign language training to an unlimited number of students. Potential applications of this technology include: any educational provider of sign language for hearing, hard of hearing, and late deafened adults; emergency services; legal services; police departments; and health care systems.

Small Business Innovative Research (SBIR Phase I)
Florida

Using Virtual Reality to Improve Self-Determination, Self-Esteem, and Interaction Skills in Minimizing Barriers to Education and Employment for Individuals with Disabilities

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Principal Investigator: Charles Lovett
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Project Number: ED-99-PO-4695
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,284

Abstract: Virtual Reality can be used as an innovative technology to improve the self- determination, self-esteem, and positive interaction skills which could minimize barriers to education and employment for people with disabilities. Currently available hardware and software components, including adaptive devices, connection to the Internet, scenarios/simulations, databases, and artificial intelligence, are available to construct VR workstations. These workstations can be used with individuals with disabilities for training in self-determination, self-esteem, and positive interaction skills, and allow them to transition to the workplace.

Small Business Innovative Research (SBIR Phase I)
Illinois

Virtual Mesa Verde: An Interactive Media Program for Young Persons with Physical Disabilities

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Principal Investigator: Martin McCarthy Jr., PhD
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Project Number: ED-99-PO-4870
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,950

Abstract: This project develops an interactive Web-based Virtual Reality tour of Mesa Verde National Park, a UNESCO designated World Heritage Cultural Site. The park's unique beauty, ecological variety, archeological history, and expert staff make it a true national treasure. However, some of the attractions are only partially accessible and others are inaccessible to people with physical disabilities. Information about facilities for people with disabilities at the Park and in the surrounding area can be incomplete and difficult to obtain. This program provides detailed, immersive, multidimensional, virtual experiences of exemplary National Parks for people with disabilities. In addition, this program provides online trip planning services for people with disabilities.

Small Business Innovative Research (SBIR Phase I)
Kentucky

MultiSCAN 2000 - A Single Switch Developmental Training Aid for Teachers and Students

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331 West Second Street
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Principal Investigator: Warren E. Lacefield, PhD; Penelope D. Ellis
Public Contact: 606/233-2332; Fax: 606/231-0725

Project Number: ED-99-PO-4652
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,919

Abstract: The MultiSCAN 2000 project develops and field tests software designed to provide an interesting and engaging series of training activities. The goal is to teach much-needed scanning skills to students who require this mode of computer access to facilitate successful integration in the regular classroom. A series of fully featured switch training software activities and a manual for teachers and students emphasizes clear concise training strategies to assess students' level of functioning and promote single-switch skill development beyond cause-and-effect and simple scanning toward more powerful, abstract, multifunction access technologies. The program can be used by classroom teachers, early intervention specialists, rehabilitation professionals, speech/language pathologists, and physical and occupational therapists seeking to facilitate computer access and cognitive skill development of children and adults with congenital or acquired disabilities.

Small Business Innovative Research (SBIR Phase I)
Louisiana

Interactive Multimedia Math Instruction for Elementary School Children with Hearing Impairments

Technology International Incorporation of VA (TII)
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Laplace, LA 70068

Principal Investigator: Laurel McLagan
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Project Number: ED-99-PO-4641
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000

Abstract: This illustrated, interactive multimedia framework incorporates children's stories and math lessons in both English and American Sign Language (ASL) for the promotion of math skills of elementary school children, grades K through 6, who are deaf or hard of hearing. The content is accessible via CD-ROM on a personal computer, over a school computer network, or across the World Wide Web. Children who are deaf or who have hearing disabilities often find it more difficult to express themselves or understand specific concepts, especially abstract ones such as math, due to a lack of vocabulary and English proficiency. Having material accessible on computer-based multimedia and video as well as on the World Wide Web facilitates promotion of the material and gets the interest of students. For children with hearing disabilities, animation, rich illustrations, and sign language (ASL) representation of math concepts increase acquisition and enhance the technical development of targeted children.

Small Business Innovative Research (SBIR Phase I)
Maryland

The Visual Talker: Real-Time Speech-to-Text Visual Translator System for Classroom Environments

TeleSonic
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http://www.telesonic.com

Principal Investigator: Judith Cabral
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Project Number: ED-99-PO-4666
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000
Abstract: This projects addresses the issues faced by the school-age children with hearing loss in classroom settings by developing practical real-time speech-to-text solutions for educators. A practical real-time speech-to-text system for use in classroom settings by teachers, their students with hearing loss and/or speech impairments, and all other students, provides a full participation communications system. Research and development include identifying issues within the classroom, identifying system components, customizing software and hardware, and seeking consumer input. Anticipated benefits include new technical approaches and tools for teachers in supporting the mandates of inclusive education. The program should enable students with a hearing loss to achieve the outcomes expected of all students, such as a better understanding of the information presented, greater independence, productivity, and quality of life that promotes equity and learning opportunities.

Small Business Innovative Research (SBIR Phase I)
Maryland

CD-ROM of Visually Represented Songs for Young Deaf Children

Institute for Disabilities Research and Training, Inc.
2424 University Boulevard West
Silver Spring, MD 20902
idrt@aol.com
http://www.idrt.com

Principal Investigator: Corinne Vinopol
Public Contact: 301/942-4326; Fax: 301/942-4439

Project Number: ED-99-PO-4637
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,996

Abstract: This project initiates development of a CD-ROM for young deaf children in which the story/concept, volume, notes, and rhythm of three simple songs are depicted through graphic representations of each of these aspects, and are coordinated with each other. Music is an important part of social development for young children and has proven to contribute to mathematic, linguistic, and motor development. Deaf children are not privy to the nursery rhymes and songs that hearing children learn as a part of their culture. With this program, audio information is converted to numerical data, that in turn, is analyzed mathematically to provide depictions of the sound components. Programming in Visual Basic controls presentation and timing of graphics. Videoclips of ASL translations and word-for-word signed representations of the songs are elective features. An interpreter dressed as a signing "dog," is used as lead character.

Small Business Innovative Research (SBIR Phase I)
Massachusetts

Inexpensive Multiple-Use Education Communication Network

Talking Lights, L.L.C.
28 Constitution Road
Boston, MA 02129

Principal Investigator: George Hovorka, 781/665-9200
Public Contact: Neil Lupton, PhD, 617/242-0050; Fax: 617/242-0046

Project Number: ED-99-PO-4746
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $50,000
Abstract: The visible light educational information transfer system (VLEITS) transmits data to a personal information device (PID) that can be used to convey personalized information to students. VLEITS is remarkably inexpensive because it requires no additional or special wiring other than that already typically installed for existing lighting fixtures. The network uses currently installed visible lighting, such as incandescent or fluorescent lighting, as the carrier medium for the data. The PID receives and displays control commands, text, and graphics transmitted over ambient room lighting. Information is presented to users in textual, multilingual, or graphical format. The system is developed in connection with experts on education of students with disabilities, and is evaluated and tested by these users to maximize user-friendliness and value.

Research on Using a Situational Evaluation System to Assist in the Acquisition or Repurposing of Instructional Technology

CYBER Learning Corporation
1177 Rose Lane
St. Paul, MN 55112

Principal Investigator: Catherine Dunnagan
Public Contact: 651/628-0460

Project Number: ED-99-PO-4649
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,837
Abstract: This project designs a prototype software application that automates the use of validated templates to determine which instructional media meets the special needs of students with disabilities and supports the requirements of families and professionals in rehabilitation and special education. The design document and integration templates/software prototype evaluate appropriateness of instructional materials for students with learning disabilities or developmental disabilities in middle school. The customized templates/software integrated into the situational evaluation methodology assist in the planning for the acquisition or re-purposing of instructional technology and media, enhance the use of new and complicated hardware/software, and chart management changes and planning. The tool is based on current research in the 4th Generation Instructional Systems Design (ISD) Model.

A Modular Desktop Manipulator

Applied Resources Corporation
Rehabilitation Technologies Division
1275 Bloomfield Avenue
Fairfield, NJ 07004
http://appliedresource.com/RTD

Principal Investigator: Richard Mahoney
Public Contact: 973/575-0650; Fax: 973/575-0709

Project Number: ED-99-PO-4636
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $49,987
Abstract: This project explores the feasibility of the Modular Desktop Manipulator in terms of facilitating access to hands-on science education environments for students with physical disabilities. This includes the construction of a working prototype of the system in conjunction with teachers and consultants. The Modular Desktop Manipulator permits students with physical disabilities to carry out effectively a wide range of tasks in a classroom setting in a way that is supportive of the students' learning and is easily facilitated by the teacher. The modularity and extensibility of the device permits its use in a wide range of custom desktop activities.

Small Business Innovative Research (SBIR Phase I)
Pennsylvania

Testing the Feasibility of an Inexpensive, Versatile Self-Feeding Tool for People with High Level Paralysis

Arlyn Toolworks
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Carlisle, PA 17013
osbornej@epix.net

Principal Investigator: Joseph Osborne
Public Contact: 717/249-7729; Fax: 717/249-0774

Project Number: ED-99-PO-4650
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $48,554
Abstract: This project designs and builds a small, robotic self-feeding appliance. Its practicality is tested by end users and occupational therapists. At least 750,000 people in the U. S. suffer from paralyzing conditions that can make it impossible to feed themselves. There is no device available that is sufficiently capable and inexpensive to have achieved widespread use; therefore, a small, inexpensive, tabletop robotic self-feeding appliance can fill this need.

Small Business Innovative Research (SBIR Phase I)
Pennsylvania

Acoustically-Prompted Karaoke for the Blind and the Visually-Impaired

Troubadour Enterprises, Inc.
2301 Cherry Street, 3J
Philadelphia, PA 19103
lousandyt@aol.com

Principal Investigator: Louis Tubman
Public Contact: 215/563-5435

Project Number: ED-99-PO-4771
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $48,165
Abstract: This project tests the efficacy of the Acoustiprompter system and the feasibility of its commercial development. Acoustiprompter is a recording method and play-system for acoustically-prompted karaoke. Conventional karaoke uses visual prompting to enable spontaneous sing-along without prior memorization of lyrics. People who are blind or visually impaired are largely excluded from participation. Through a four-track play system with headphones, the Acoustiprompter provides stereo music, optional lead-guide vocal, and optional, user-controlled acoustical prompting of the lyrics. Words, rapidly spoken and appropriately phrased, are delivered just before they are needed so the user can easily, naturally, and enjoyably participate in an otherwise unavailable recreational activity. Studies of volunteers using a singing booth set up to simulate the Acoustiprompter experience are carried out with the cooperation of the Overbrook School for the Blind, in Philadelphia, to measure learning curve, ease of use, acceptability, and participant satisfaction.

Small Business Innovative Research (SBIR Phase I)
Pennsylvania

Music Touch: Adaptive Technology for Teaching Music Braille and Musical Concepts

Dancing Dots Braille Music Technology, L.P.
P.O. Box 927
Valley Forge, PA 19482
info@dancingdots.com
http://www.dancingdots.com

Principal Investigator: William McCann
Public Contact: 610/783-6692; Fax: 610/783-6732

Project Number: ED-99-PO-4767
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000
Abstract: Mainstreaming has spawned a critical loss of teaching resources for braille music. This circumstance impedes full participation in school music programs, hindering literacy and equal access to information. This project develops a multimedia teaching system for music braille. A set of software functions, developed by TACK-TILES Braille Systems, LLC, for the IntelliKeys keyboard from IntelliTools, supports the use of a hardware prototype of a braille computer keyboard overlay. The system allows the user to press an individual braille character shown on a Tack-Tile block mounted securely on the keyboard. The key press triggers a musical tone, a verbal cue, or sound effect. Use of this system can be integrated into an introductory set of lessons on music braille. Educators and beginning music students who are blind test these lessons.

Small Business Innovative Research (SBIR Phase I)
Virginia

Haptic Economical Audio Descriptive System (HEADS)

Automated Functions, Inc.
7700 Leesburg Pike, Suite 420
Falls Church, VA 22043
autofunc@tmn.com; marylandon@compuserve.com

Principal Investigator: Ronald A. Morford
Public Contact: 703/883-9797; Fax: 703/883-9798

Project Number: ED-99-PO-4643
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 99 $49,968
Abstract: Haptic Economical Audio Descriptive System (HEADS) is custom software coupled with low-cost hatpic (force feedback) hardware to enable people with visual impairments to analyze independently and then understand the layout of Windows 98 graphic screens and the shapes of graphic symbols. HEADS enables people with visual impairments to interact independently with Windows 98 by using sound, speech synthesis, and touch.

Small Business Innovative Research (SBIR Phase II)
Florida

Signing Avatars™

Seamless Solutions, Inc.
3504 Lake Lynda Drive, Suite 390
Orlando, FL 32817
es_ssi@bellsouth.net
http://www.seamless-solutions.com/html/sign_language

Principal Investigator: Edward M. Sims, PhD
Public Contact: Carol J. Wideman, 407/737-7310; Fax: 407/737-6821

Project Number: ED-98-PO-3531
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: Phase I of this project demonstrated the possibility of using computer-generated, virtual reality representations of a signer's face, arms, and hands, called "avatars," to enable interactive sign language communication via standard phone lines and personal computers. Phase II automates transitions between signs (including facial expressions) and expands the Signing Avatars™ vocabulary to at least 500 concepts, while improving the representation of facial expressions and joint motions. Goals for the technology include lower-cost long distance sign language communication as well as more natural and rapid interaction between humans and computer applications.

Small Business Innovative Research (SBIR Phase II)
Florida

Automated PC-Based Speech-to-Sign-Language Interpreter

Seamless Solutions, Inc.
3504 Lake Lynda Drive, Suite 390
Orlando, FL 32817
es_ssi@bellsouth.net
http://www.seamless-solutions.com/html/sign_language

Principal Investigator: Edward M. Sims, PhD
Public Contact: 407/737-7310; Fax: 407/737-6821

Project Number: ED-99-CO-0116
Start Date: September 1, 1999
Length: 24 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $248,551
Abstract: This project integrates speech recognition and natural language processing software with Seamless Solutions, Inc.'s PC-based Signing Avatars™ 3D character animations of sign language communication to provide a prototype PC- based speech-to-sign language and text-to-sign-language interpreter. The new development in this project is the addition of Natural Language Processing (NLP), using a sign lexicon and translation rules that analyze English sentences to provide not only correct translations of each sign, but also correct and realistic facial expression, timing, and emphasis. The result is the synthesis of high quality, realistic sign language translation of spoken or textual English language input.

Small Business Innovative Research (SBIR Phase II)
Maryland

Broadcast Radio for Individuals who are Deaf: Gaining Equity (BRIDGE)

TeleSonic Division of Associated Enterprises, Inc.
31 Old Solomons Island Road, Suite 102
Annapolis, MD 21041
info@telesonic.com
http://www.telesonic.com

Principal Investigator: Leonard A. Blackshear
Public Contact: 410/841-6920; Fax: 410/841-6505

Project Number: ED-98-CO-0055
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000
Abstract: Phase I of this project proved it is feasible to transmit multimedia signals over commercial radio and to receive them with special decoder devices. Phase II develops working models of radio transmitter and receiver devices that allow simultaneous radio broadcasting of both audio and visual information. Users of TTYs, for example, could receive "closed captioned" broadcasts of radio programs. Research and development tasks include: (1) conducting ongoing technical research; (2) examining future directions in radio broadcasting; (3) finalizing synchronization schemes; (4) updating system specifications; (5) developing models; (6) conducting tests with radio stations; (7) identifying modes of sustaining further development; and (8) reporting results. Anticipated future results include development of a commercial broadcast system.

Small Business Innovative Research (SBIR Phase II)
Maryland

A Computer Program to Emulate TTY Communication

Institute for Disabilities Research and Training, Inc.
2424 University Boulevard West
Silver Spring, MD 20902
idrt@aol.com
http://www.idrt.com

Principal Investigator: Carl Jensema
Public Contact: 301/942-4326; Fax: 301/942-4439

Project Number: ED-99-CO-0117
Start Date: September 1, 1999
Length: 24 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $250,000
Abstract: This project produces a marketable Baudot TTY program for personal computers, and a programmer's tool kit for adding Baudot communication to other programs. Previous research demonstrated that it is now possible to emulate TTY communication on a personal computer using software alone. Rather than generating tones using special hardware, the tones for each Baudot character can be stored in audio waveform files and transmitted as needed. Similarly, incoming tones can be recorded into a computer and analyzed mathematically to identify the Baudot characters received. A personal computer with this software can be used to communicate with the Baudot TTY equipment currently used by the Deaf community.

Small Business Innovative Research (SBIR Phase II)
New York

Advanced Prediction Methods for Augmentative Communication

Enkidu Research, Inc.
24 Howard Avenue
Lockport, NY 14094
lesher@enkidu.net
http://www.enkidu.net

Principal Investigator: Gregory W. Lesher, MD
Public Contact: 716/433-0608; Fax: 716/433-6164

Project Number: ED-98-CO-0031
Start Date: September 1, 1998
Length: 24 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 98 $123,092; FY 99 $126,899

Abstract: This project improves communication interactions of people with communicative disabilities by improving dynamic word prediction, in which a list of probable words is presented for user selection. In the first phase, the project reduced user keystrokes by 57 percent by exploiting statistical relations between language elements to generate context-dependent prediction lists. The culmination of phase II is a set of laboratory-tested statistical prediction techniques and other software tools, assessment of human prediction performance, and optimization of predictive components. When embedded within Enkidu Research's IMPACT augmentative software, the advanced prediction techniques should provide a new level of performance under a wide range of augmentative configurations.

Independent Living and Community Integration

Independent living recognizes that each person has the right to independence through maximum control over his or her life, based on an ability and opportunity to make choices in performing everyday activities. These activities include: managing one's personal life; participating in community life; fulfilling social roles, such as marriage, parenthood, employment, and citizenship; sustaining self-determination; and minimizing physical or psychological dependence on others. Community integration incorporates ideas of both place and participation, so that a person is physically located in a community setting, and participates in community activities. Issues of consumer direction and control also are integral to concepts of community integration. NIDRR's research program encourages independent living and community integration to achieve more successful outcomes for people with disabilities, and it fosters the development of innovative methods to achieve these outcomes and to measure achievement.

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Rehabilitation Research and Training Center on Independent Living and Disability Policy

World Institute on Disability
510 - 16th Street, Suite 100
Oakland, CA 94612-1500
devva@wid.org; jackie@wid.org
http://www.wid.org/ildp/index.html

Principal Investigator: Devva Kasnitz, PhD, 510/251-4348
Public Contact: Jacqueline Gross, 510/251-4318 (V); 510/208-9493 (TTY); 510/763-4100 (V, main switchboard); Fax: 510/763-4109

Project Number: H133B50005
Start Date: September 1, 1995
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 95 $440,000; FY 96 $440,000; FY 97 $440,000; FY 98 $440,000; FY 99 $440,000
Abstract: This RRTC conducts research and training and tests strategies to support the development of public policy in independent living, and to enhance the effectiveness of people with disabilities in influencing policy. The Center's main topic areas include employment, return to work and economic security, the role of independent living centers, community assessment and change, housing, health, and transportation. Through research, training, policy analysis, and dissemination, the Center facilitates the development of tools and systems that empower people with disabilities to act on their own behalf and to create opportunities for people to become agents of change.

Rehabilitation Research and Training Center on Personal Assistance Services (PAS)

World Institute on Disability
510 - 16th Street, Suite 100
Oakland, CA 94612-1502
merrie@wid.org
http://www.wid.org/pas/index.html

Principal Investigator: Deborah Kaplan, JD
Public Contact: Merrie Snead, 510/251-4314 (V); 510/208-9493 (TTY); 510/763-4100 (V, main switchboard); Fax: 510/763-4109

Project Number: H133B70008
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 97 $500,000; FY 98 $500,000; FY 99 $500,000
Abstract: This project furthers the understanding that Personal Assistance Service (PAS) systems design can better promote the economic self-sufficiency, independent living, and full integration of people of all ages and disabilities into society. The project explores the models, policies, access to, and outcomes of, personal assistance services, through: (1) gathering perspectives of consumers, program administrators, policy makers, and personal assistants using a State of the States survey and database development; (2) a policy study on the impact of devolution; (3) a cost-effectiveness study; (4) a study of workplace PAS; and (5) a study on the supply of qualified PAS.

Rehabilitation Research and Training Center on Positive Behavioral Support

University of South Florida
Division of Applied Research and Educational Support (DARES)
Department of Child and Family Studies
13301 Bruce B. Downs Boulevard
Tampa, FL 33612
cuenca@fmhi.usf.edu
http://www.rrtcbps.org

Principal Investigator: Glen Dunlap, PhD
Public Contact: Kirsten Cuenca, 813/974-3115; Fax: 813/974-6115

Project Number: H133B980005
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $600,000; FY 99 $600,000

Abstract: This project acquires and disseminates new knowledge to advance the field of behavior support in school, home, and community settings. Through research and training projects, the Center increases and enhances the effectiveness of behavioral support strategies, expands the applicability of effective practices to broader and more diverse populations, and addresses the need for effective training, technical assistance, and widespread dissemination. The three primary research projects: (1) expand the applicability of effective interventions; (2) increase and enhance the effectiveness of interventions; and (3) understand and describe the long-term impacts and processes of effective behavioral support. Embedded within these research projects are systematic studies of nonaversive interventions, etiology and prevention, maintenance, self-management, and functional assessment. The three primary training projects focus on: (1) inservice and preservice training; (2) dissemination; and (3) technical assistance. The Center is conducted as a consortium that includes the University of South Florida, the University of Oregon, State University of New York (SUNY) at Stony Brook, the University of Kansas, the University of California at Santa Barbara, and the University of California at Hayward.

Rehabilitation Research and Training Center for Children's Mental Health

University of South Florida
Florida Mental Health Institute
13301 Bruce B. Downs Boulevard MHC2335
Tampa, FL 33612-3807
kutash@fmhi.usf.edu
http://rtckids.fmhi.usf.edu

Principal Investigator: Robert Friedman, PhD
Public Contact: 813/974-4661 (V); 800/955-8771 (TTY); Fax: 813/974-6257

Project Number: H133B990022
Start Date: September 28, 1999
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $750,000
Abstract: This project conducts research and training that improves the delivery of services to children and adolescents who have serious emotional disturbances and their families. Operating under the model that children and families are best served in coordinated, community-based systems of care, the RRTC conducts research in the areas of managed care, accountability, school-based mental health services, and documentation of the characteristics of this population. The project provides training in the areas of leadership and participatory evaluation, as well as on children's mental health services research within a graduate program at the University of South Florida.

Rehabilitation Research and Training Center in Rehabilitation of Persons with Long Term Mental Illness

Boston University
Center for Psychiatric Rehabilitation
940 Commonwealth Avenue
Boston, MA 02215-1203

Principal Investigator: Marianne Farkas
Public Contact: 617/353-3549

Project Number: H133B990023
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $749,990
Abstract: The focus of the Center is on the recovery and rehabilitation of people with long-term mental illness, and the individual and environmental factors that promote recovery. The Center is tied together by its programmatic focus on three specific core areas, strengthened by the use of the appropriate research strategies, and assisted by a vigorous program of training, technical assistance, and dissemination activities designed to maximize the impact of the RRTC at all levels in the field of psychiatric rehabilitation. The research program is organized into the following three core or programmatic areas of investigation: Recovery Dimensions, Rehabilitation Interventions, and Alternative Interventions. The research projects are designed to have an impact on the field at multiple levels, at the personnel level as well as the program and system levels. Research projects use a participatory research process with significant input from consumers and other stakeholders, and culminate in dissemination, training, or technical assistance activities to maximize the impact of the research program. The Training, Dissemination, and Technical Assistance (TDTA) projects are designed to provide exposure, experience, and expertise level of knowledge transfer. The TDTA program produces new technologies in recovery and rehabilitation, and increases the likelihood that researchers, service providers, and others use the cumulative knowledge developed by this Center.

Rehabilitation Research and Training Center for Community Integration of Persons with Mental Retardation

University of Minnesota
RTC/Institute on Community Integration
204 Pattee Hall
150 Pillsbury Drive Southeast
Minneapolis, MN 55455
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http://ici2.coled.umn.edu/rtc

Principal Investigator: Charlie Lakin, PhD, 612/624-5005
Public Contact: Mary Hayden, PhD, 612/625-6046; Fax: 612/625-6619

Project Number: H133B980047
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: The Center conducts research, training, technical assistance, and dissemination of relevance to enhancing inclusion and self-determination of citizens with mental retardation and related developmental disabilities (MR/DD). The research program has a strong applied focus and recognizes broad responsibilities for organized, comprehensive, and accessible research in each of six outcome areas: support to families, state system reform, Medicaid services, policies and practices for full participation, consumer controlled services, and direct support personnel. The approach to each priority area includes: (1) research syntheses of the state of knowledge and practice; (2) secondary analyses of high quality, topically relevant national and state data sets; (3) case studies of best practices; (4) evaluation of demonstration efforts to improve policy and practice; (5) survey and interview studies of critical issues; and (6) group process studies with key constituencies. An integrated intramural training program addresses the development of skilled disability researchers and rehabilitation professionals, including graduate students, postdoctoral associates, and research interns. Outreach training programs provide training and technical assistance to agencies and individuals providing support to people with MR/DD, including members of their own families. Outreach programs include conferences and workshops for a wide variety of national, regional, and state audiences, a state of the science conference, and intensive technical assistance with community organizations, including advocacy and self-advocacy organizations. The Center disseminates practical information to targeted audiences (i.e., IMPACT, Policy Research Brief, Frontline Initiative) and maintains high standards for scholarly productivity (i.e., books, journal articles). The Center provides print and Web site access to a variety of other information including descriptions of best practices, national statistics on services and expenditures, resource guides, and distance learning training.

Rehabilitation Research and Training Center on the Community Integration of Individuals with Traumatic Brain Injury

Mount Sinai School of Medicine
One Gustave L. Levy Place, Box 1240
New York, NY 10029
wayne_gordon@smtplink.mssm.edu
http://academic.mssm.edu/tbinet

Principal Investigator: Wayne A. Gordon, PhD
Public Contact: 212/659-9372 (V); 212/241-8978 (TTY); Fax: 212/348-5901

Project Number: H133B980013
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $800,000; FY 99 $800,000
Abstract: This program includes seven projects: (1) evaluate a measure of community integration that assesses an individual's level of participation, and the experience of that participation, in home and community; (2) evaluate replications of The Program Without Walls, a pioneering, consumer-oriented program for the delivery of vocational rehabilitation services developed in Rochester, New York; (3) respond to the needs of families by providing a "veteran" mentor, one with long-term experience in coping with the challenges of TBI in their own family; (4) evaluate the Consumer Advocacy Model (CAM), developed to address alcohol or drug abuse in people with disabilities in an outpatient TBI day-treatment program; (5) study the emergence and resolution of post-TBI behavioral and emotional challenges to determine who is most at risk, and when, and what factors in the environment help in overcoming challenges such as substance abuse, depression, and anxiety disorders; (6) conduct a longitudinal study of older individuals with TBI and their counterparts without disabilities, to explore the factors associated with successful post-TBI aging; and (7) validate the Brain Injury Screening Questionnaire (developed by this RRTC) within a high school in New York City. Both academic performance and behavioral challenges of children identified as having had a brain injury are documented.

Rehabilitation Research and Training Center to Improve Services for Children with Serious Emotional and Behavioral Disabilities and Their Families

Portland State University
Regional Research Institute
School of Social Work
P.O. Box 751
Portland, OR 97207-0751
bridgea@rri.pdx.edu
http://www.rtc.pdx.edu

Principal Investigator: Barbara Friesen, PhD
Public Contact: Arthur Bridge, Assistant Director for Operations, 503/725-4256; Fax: 503/725-4180

Project Number: H133B990025
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $725,000
Other funding: FY 99 $150,000 (Center for Mental Health Services (CMHS))
Abstract: This project conducts an integrated set of research, training, and technical activities to: (1) develop and evaluate service delivery models for children with an emotional disturbance and their families, including family-centered and culturally sensitive services; (2) define and evaluate the formal and informal components of family support and identify successful family support interventions; (3) identify and evaluate early intervention strategies; and (4) identify, develop, and evaluate communication skills to enable families and service providers to communicate effectively with each other. Research issues include caregivers and employment, inclusive care, early intervention, education, service delivery, training, and mentoring.

Rehabilitation Research and Training Center in Community Integration for Individuals with Spinal Cord Injury

Baylor College of Medicine
Department of Physical Medicine and Rehabilitation
One Baylor Plaza
Houston, TX 77030
khart@bcm.tmc.edu; drintala@bcm.tmc.edu

Principal Investigator: Karen A. Hart, PhD; Diana H. Rintala, PhD
Public Contact: Karen A. Hart, PhD, 713/797-5946; Fax: 713/797-5982

Project Number: H133B40011
Start Date: January 24, 1994
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 94 $650,000; FY 95 $650,000; FY 96 $650,000; FY 97 $650,000; FY 98 $650,000; FY 99 (No-cost extension through 1/23/01)
Abstract: This RRTC: (1) conducts a program of research and training that develops and disseminates new knowledge and techniques to improve personal and psychological adjustment after spinal cord injury (SCI); (2) enhances family life, including involvement of family members in rehabilitation, and options for marriage, sexuality, reproduction, and parenting; (3) enhances participation in community life; (4) improves and maintains health status; (5) improves systems for long-term care (health and other support services) in the community; and (6) identifies gender and cultural differences relevant to community integration of people with SCI. This RRTC houses the National Database of Educational Resources on SCI, collected from a nationwide network of rehabilitation facilities and NIDRR-funded projects on SCI.

Rehabilitation Research and Training Center on Independent Living Center Management and Services

The Institute for Rehabilitation and Research (TIRR)
Independent Living Research Utilization (ILRU)
2323 South Shepherd Boulevard, Suite 1000
Houston, TX 77019
ilru@ilru.org; lfrieden@ilru.org
http://www.ilru.org

Principal Investigator: Lex Frieden
Public Contact: 713/520-0232 (V); 713/520-5136 (TTY); Fax: 713/520-5785

Project Number: H133B50003
Start Date: October 1, 1995
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $500,000; FY 99 $500,000
Other funding: FY 95 $100,000 (Source: Rehabilitation Services Administration); FY 96 $100,000 (Source: RSA); FY 97 $100,000 (RSA); FY 98 $100,000 (RSA); FY 99 $100,000 (RSA)
Abstract: This project: (1) enhances management performance in independent living centers through improved management practices, developed and tested in research-based models and disseminated through training and technical assistance programs; (2) identifies model programs to address diversity and inclusion centers; (3) uses innovative learning techniques to improve the delivery of training and retraining programs for center staff; (4) examines strengths and weaknesses of various governing board structures; (5) improves service coordination between independent living centers, agencies, and programs providing employment services to people with disabilities; (6) documents and improves operations of statewide independent living councils; (7) identifies innovative strategies for center for independent living (CIL) collaboration with school programs, to facilitate transition services for youth with disabilities; (8) analyzes CIL funding and diversification patterns; (9) ensures coordination with training and technical assistance efforts funded by the Rehabilitation Services Administration; and (10) disseminates findings of the RRTC through research-based training and technical assistance to independent living centers, agencies, programs, and other relevant audiences.

Leadership Development - A New Generation of Effective Leadership

Howard University
2900 Van Ness Street Northwest
Holy Cross Hall, Suite 100
Washington, DC 20008
swalker@law.howard.edu

Principal Investigator: Sylvia Walker, EdD
Public Contact: 202/806-8086; Fax: 202/806-8148

Project Number: H133A990020
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 99 $175,000
Abstract: This project improves services provided under the 1998 Amendments to the Rehabilitation Act of 1973, especially services provided to individuals from minority populations. The goal is to increase the leadership competencies of individuals with disabilities from underserved and underrepresented communities, thereby maximizing the full inclusion and integration of people with disabilities from underserved and underrepresented groups into society, employment, independent living, family support, and economic and social self- sufficiency. All activities are focused on promoting and ensuring full participation of members of groups who have traditionally been underserved by the vocational rehabilitation system. Community-based rehabilitation, disability, and educational organizations and entities work as collaborators to the project in nominating people from underserved and underrepresented groups to participate in the training and to provide assistance to the participants in the implementation of a follow-up plan of action. Individuals participate in a relevant and high-impact leadership development training program. The project also provides a broad range of technical assistance, consultation, and support services to participants during the implementation of their individual action plans.

Parents with Disabilities and Their Adolescent Children

Through the Looking Glass
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Project Number: H133G990130
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $150,000

Abstract: This project: (1) defines the national population of parents with disabilities with adolescent children and their demographic characteristics; (2) compares family responsibilities, i.e., household tasks and personal care tasks of adolescents in families in which a parent does or does not have a disability; (3) understands key disability-related concerns for the parents and their adolescent children; (4) understands family responsibilities within the context of families in which a parent has a disability; (5) understands the influence of a parental disability on family togetherness and rituals; (6) develops a task analysis model that can be used to evaluate the degree to which adolescents assist their parents with personal care tasks; (7) generates hypotheses for further research on parents with disabilities and their children; and (8) develops and documents methods of reaching underrepresented groups of parents with disabilities.

The Relationship Between Early Experiences and Development in Young Children with Severe Visual Impairments: A Cross-Cultural Perspective

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Project Number: H133G80119
Start Date: August 1, 1998
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 98 $116,910; FY 99 $117,539

Abstract: This longitudinal project examines the relationship between early experiences and the development of infants and toddlers who are blind. Subjects consist of 60 caregiver-child dyads divided equally into four different ethnic groups (i.e., African-American, Hispanic/Latino, Asian-American, and Euro-American). The children, approximately 12 months of age at the onset of the study, are examined for approximately 16 months, with data collection occurring at four-month intervals. Major objectives include: (1) to describe the home environment and early experiences of young children with severe visual impairments; (2) to examine the differences in home environment and early experiences between African-American, Hispanic/Latino, Asian-American, and EuroAmerican families; (3) to examine the relationship between caregiver-child interaction and home environment to the development of young children with severe visual impairments; (4) to identify within-group variables that positively influence the developmental outcomes of young children with severe visual impairments; and (5) to identify culturally-accepted practices and strategies that facilitate the developmental outcomes of young children with severe visual impairments.

Outcomes for Children and Youth with Autism

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Principal Investigator: Phillip Strain
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Project Number: H133G70006
Start Date: October 1, 1997
Length: 32 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,999; FY 99 $124,912
Abstract: This project helps to identify key community variables that enhance or hinder positive, long-term outcomes of early intervention services for children and youth with autism. It provides a community-based ecobehavioral assessment of the current status of children 6 to 15 years of age who received comprehensive early intervention services for children diagnosed by at least two independent sources as autistic (using DSM-III criteria). Using ecobehavioral assessment procedures, the project focuses its efforts on completing a comprehensive, community-setting portrayal of children who vary from 1 to 13 years away from their early intervention experience. Based upon hypotheses generated by correlational and path analyses between criterion outcomes and ecobehavioral events/settings, researchers expect to identify key community variables that serve to enhance or hinder positive, long-term outcomes.

Evaluation of Voucher Alternatives for Early Intervention Developmental Disability Services

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Project Number: H133G80121
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $119,687; FY 99 $124,411
Abstract: This study documents the operation of a funding program that provides a flexible mechanism for early intervention services in the Denver area for families with children from birth to age 3 with developmental disabilities. The system is evaluated in terms of administrative and service costs, service utilization, family satisfaction, and changes in child functional abilities. The study includes a comparison group to which services are provided through a traditional nonvoucher system. These comparisons are made for administrative and service costs, patterns of service utilization, child, parent, and system outcomes. The outcome of this study is increased understanding of how flexible funding can contribute to full inclusion by examining the effect on families and early intervention settings.

Home-Based Video-Counseling for Rural At-Risk Adolescents with Epilepsy and Their Parents: An Accessibility and Outcome Analysis

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Project Number: H133G990500
Start Date: December 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 149,900

Abstract: This project is evaluating the impact of issue-specific, video-system counseling on the psychosocial and educational functioning of at-risk teens with epilepsy and their parents who reside in rural areas. Objectives include: (1) assessing the difference between home-based video counseling and office-based counseling on the level of improvement, severity, and frequency of specific problems identified by at-risk teens and their parents; (2) assessing the difference between home-based video counseling and office-based family counseling on the therapeutic relationship between family member and counselor, and on overall consumer satisfaction; (3) examining the effects of home-based video counseling and office-based counseling on overall family functioning; and (4) testing for differences in adherence to intervention and in attrition rates between families in the two counseling conditions.

Developing and Evaluating Family Networks: Positive Behavioral Support

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Project Number: H133G60119
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000; FY 99 (No-cost extension through 8/31/00)

Abstract: The purpose of this project is to develop, demonstrate, and evaluate a program for building competent family networks concerned with challenging behaviors and developmental disabilities. Using a participatory training approach in collaboration with community agencies (e.g., Parent-to-Parent), the project is establishing family networks of reciprocal support. Perspectives and practical techniques of behavioral support are being shared with the networks through a combination of demonstration, presentation, practice, and coaching strategies. After the initial period of network development and training in behavioral support strategies, the project assists in the maintenance of network interactions and evaluates the short-term and longitudinal processes and outcomes associated with the network's interactions. Over the three-year period, the project is conducted within three multicultural community "cohorts" of family members.

Integrated Services and Parent Partnerships in Schools: Meeting the Needs of Children with Emotional and Behavioral Disabilities and Their Families

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Project Number: H133G70013
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $125,000; FY 98 $124,102; FY 99 $124,156
Abstract: This project empirically tests the effectiveness of an integrated services model designed to help children with severe emotional and behavioral disabilities (EBD) by including parents as partners with service providers and schools. The project identifies outcomes for children with EBD in the areas of academic achievement, social functioning, and community adjustments. Under the conditions of an integrated services model, outcomes of parents as partners versus usual special education practice are compared.

The Development of a Valid System for Measuring Rehabilitation Service Outcomes

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Project Number: H133G990137
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 99 $146,373
Abstract: This project develops an easy-to-use, reliable, and valid evaluation system called the Rehabilitation Outcome Measurement and Evaluation System (ROMES). The goal of the project is to develop a standardized rehabilitation outcome measurement system that addresses vocational status, functional capacity, and quality of life, and for rehabilitation outcomes that maximize provider/consumer involvement in setting rehabilitation goals and measuring rehabilitation gains in all competency areas. These include independent living, social and psychological functioning, and work. The research product is primarily targeted to meet the program evaluation needs of people with disabilities, rehabilitation service providers, and managers/administrators in state vocational rehabilitation (VR) as well as those involved in private rehabilitation.

Louisiana's Self-Determination Research Project

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Project Number: H133G990169
Start Date: April 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $149,999
Abstract: This project investigates short-term and long-term effects that self- determination instruction, participation in a Youth Leadership Forum (YLF), or both have on the self-determination abilities, IEP involvement, and adult outcomes of adolescents with disabilities. The curricula and the YLF are based on these premises: (1) self-determination is a critical factor for successful transition into adulthood; (2) individuals with disabilities do not easily achieve desired adult outcomes because they generally do not possess self- determination skills; and (3) self-determination instruction improves these students' adult outcomes. The target population for this study is adolescents with disabilities attending high schools throughout Louisiana, beginning in their junior year, until one year after exiting high school.

Secondary Conditions, Assistance, and Health-Related Access Among Independently Living Adults with Major Disabling Conditions

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Project Number: H133G70205
Start Date: October 1, 1996
Length: 36 months
NIDRR Officer: Toby Lawrence
NIDRR Funding: FY 96 $124,136; FY 97 $124,136; FY 98 $124,136; FY 99 (No-cost extension through 8/31/00)

Abstract: Participants in this study are affiliated with six Massachusetts independent living centers (ILCs). The cross-disability sample includes people with a range of significant physical, mental, sensory, and developmental disabilities who require assistance with activities of daily living. Primary outcomes of interest are: (1) the frequency and severity of secondary conditions, including skin problems, seizures, chronic pain, spasms, falls, fatigue, respiratory tract infections, and urinary tract infections; and (2) reactions to medication, depression, anxiety, and injuries related to medical equipment. Mediating variables include: adequacy of personal assistance, assistive technology, access to health promotion and health care services, environmental barriers, transportation, employment, education, socioeconomic status, smoking, use of substances, and compliance with prescribed health care routines. The research study includes two annual cross-sectional surveys, each of 300 randomly-selected ILC consumers, to determine prevalence, distribution, frequency, and severity of secondary conditions. Focus groups of ILC consumers and others help interpret the data.

Quality of Life for Persons with a Spinal Cord Injury: A Qualitative Longitudinal Study

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Project Number: H133G990219
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $148,565

Abstract: This qualitative, longitudinal investigation increases understanding of the experience of quality of life (QOL) of people with spinal cord injury (SCI). The study focuses on changes in self-rated QOL from before injury (retrospectively) through 30 months post-SCI. Project objectives: (1) to collect longitudinal data on QOL as experienced by various groups of people with SCI, based on multiple unstructured interviews starting soon after injury; (2) to analyze this information with specific attention to subjective QOL differences between groups, changes and consistencies over time, and the interplay of internal factors such as personality and the will to live, with external factors such as neurological recovery, equipment, and resources; and (3) to disseminate information on QOL after SCI to consumers, professionals, and other concerned audiences. Analyses of the data address a number of specific hypotheses on the process of change in subjective QOL.

Preventing Severe Behavior Problems

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Project Number: H133G980104
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $123,192; FY 99 $124,849

Abstract: This project studies aspects of the child and his or her home and family to identify risk and protective factors in the development of severe behavior problems to identify additional ways to help to prevent later, more severe problem behaviors. Aggression and self-injurious behavior, among others, represent some of the most difficult obstacles faced by individuals with disabilities, and seriously interfere with efforts to provide them with more independent lives. The first goal is to evaluate the impact of the interventions both on a short-term and long-term basis, by comparing three groups in a stratified-random sample: (1) individuals who are to receive traditional (non-function-based) intervention; (2) individuals who are to receive a package of function-based interventions; and (3) individuals who are to receive a package of function-based behavioral interventions with ongoing intervention and consultative support. The study evaluates if intervention support successfully prevents behavior problems from escalating into more severe problems; follow-up is conducted up to two years following the initial intervention. The second goal is to identify developmental and epidemiological patterns of behavior for all 140 children that are predictive of later problems, over a three year period, using sophisticated structural equation modeling.

Effectiveness of a System that Includes Computer-Based Monitoring in Promoting Care Among Older Persons with Physical Disabilities

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Project Number: H133G990086
Start Date: August 1, 1999
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 99 $150,000

Abstract: This study determines the effectiveness of using a computer-based system of services between live-alone older people with physical disabilities and health care professionals. The system, which includes Internet-based communication (including audio and video), is used to: (1) monitor daily self-care needs; (2) identify the need for a home health care visit; (3) suggest self-administered interventions; and (4) provide information and training to enhance daily functional performance. The study employs a Randomized Clinical Trial (RCT) design with 100 older people with physical disabilities from Western New York, an Evaluation of Assistive Device Use Among Older Rehabilitation Patients, an Evaluation of Assistive Device Use Among Older Renters, and an Environmental Skill-Building Program for Family Caregivers of Dementia Patients. Secondarily, the study determines: (1) the costs associated with placement of computer technology and Internet capacity in the homes of frail elders and instruction in the self-care monitoring program; (2) the reliability of self-report functional assessment using computer technology in comparison to in-home observation of self-care performance; and (3) the acceptability of computer monitoring and utilization of intervention components.

A Family Intervention Following Traumatic Brain Injury in Children

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Project Number: H133G990069
Start Date: April 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,008
Abstract: This project runs an outpatient intervention program that studies the impact on caregiver functioning of moderate to severe traumatic brain injury (TBI) in children. It seeks to reduce psychological disability in caregivers, thereby enabling the family to support the child's recovery from TBI in an optimal way, through development and testing of an intervention adapted from established problem-solving and communications skills training protocols that have been used successfully with families of children with chronic illnesses and behavior disorders. The study is a randomized, controlled trial comparing the effects of standard medical and psychosocial care to standard care plus the individualized problem-solving and communication intervention on the following outcomes: (1) injury-related stress and burden; and (2) caregiver psychological distress. Participants include the families of children, aged 6-14, who have experienced a moderate to severe TBI between 6 and 18 months prior to study participation. Families are randomly assigned to the standard care or problem-solving/communication skill groups. Group differences are examined using a multivariate approach to analysis of covariance, controlling for injury severity, age, gender, sociodemographic status, and time since injury. The hypothesis is that better problem-solving and communication skills means less injury-related stress and better caregiver functioning among the intervention group compared to the standard care group.

Building Comprehensive Behavioral Support: Bridging the Gap

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Project Number: H133G80116
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $124,975; FY 99 $124,975
Abstract: This project develops, validates, and disseminates a model of behavioral support that transforms research results into practical strategies that families and residential providers can use to break the destructive cycle of problem behaviors in the lives of individuals with severe intellectual disabilities. Such problem behaviors remain the single most common reason people with disabilities are isolated from school, work, and community opportunities. The project focuses on youth and adults with severe intellectual disabilities who have a history of problem behaviors, with an emphasis on providing residential staff and families with a practical technology that allows them to redesign behavioral support. Central objectives of the project: (1) to define a model for moving to comprehensive, positive behavioral support; (2) to conduct research studies examining the effects of the model on change in problem behaviors and lifestyle; (3) to develop an operations manual that support personnel can use to create practical plans of behavioral support; (4) to field-test the operations manual with residences that provide residential support to people with severe intellectual disabilities and problem behaviors; (5) to disseminate project outcomes/products; (6) to manage the project; and (7) to evaluate the project.

Women's Personal Assistance Services (PAS) Abuse Research Project

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Project Number: H133G70154
Start Date: July 1, 1997
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $125,000; FY 98 $125,000; FY 99 $125,000
Abstract: This project increases the identification, assessment, and response to abuse by formal and informal personal assistance service (PAS) providers of women with physical and/or cognitive disabilities living independently in the community. The aims of the project are to: (1) develop culturally sensitive screening approaches to identify PAS abuse; (2) develop a culturally appropriate PAS abuse assessment protocol; and (3) develop culturally appropriate response strategies to prevent and manage PAS abuse. Culturally diverse participants assist in the development of these three aims. The study includes three phases, beginning with a focus group study of culturally diverse women with physical and cognitive disabilities. Phase II involves the use of findings from Phase I to develop and disseminate a survey of 260 culturally diverse females with disabilities drawn from four national organizations. Phase III involves the development and field testing of the effectiveness of the screening, assessment, and support protocols, the final product being a comprehensive package of PAS abuse prevention materials. The project plans to disseminate these materials on a national basis.

PALS: Postsecondary Adjustment, Literacy, and Socialization for Secondary Students with Mild/Moderate Disabilities

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Project Number: H133G70050
Start Date: September 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $124,946; FY 98 $124,946; FY 99 $124,946
Abstract: This project conducts an upward extension of Peer Assisted Learning Strategies (PALS) to improve Postsecondary Adjustment, Literacy, and Socialization (PALS) for secondary students with mild and moderate disabilities (MMD): PALS for PALS. The goals are to improve literacy and numeracy, enhance socialization, and facilitate successful postsecondary adjustments for students with MMD who enter technical training and nonsupported work settings after high school. Development of this instructional approach is expected to contribute to high schools' capacity to provide comprehensive and effective programs for students with MMD.

The Transition of Pediatric Burn Survivors into Adulthood

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Project Number: H133G990052
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $150,000

Abstract: This study examines the long-term adjustment of pediatric burn survivors as they undergo the transition from adolescence and burn induced dependency to the independence and autonomy of adulthood. It is hypothesized that individuals burned as children have increased difficulty with the transition from home to independent living. They expect that for these individuals, psychosocial difficulties with the transition to adulthood increase with larger burn size. The study completes a baseline assessment of 150 individuals ages 18 to 26, burn size 30 percent or greater, and at least 2 years post burn, who have been treated at the Shriners Burns Hospital as children. This assessment includes a physical disability determination and intelligence testing as well as interviews focusing on psychiatric disorder, psychosocial adjustment, living arrangement, and family relationships. The data is analyzed against age, with special attention to gender, burn size and viability, age of burn, physical handicaps, intelligence, and initial family environment.

Self-Esteem and Women with Physical Disabilities

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Project Number: H133G990039
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Donna Nangle
NIDRR Funding: FY 99 $149,997

Abstract: The purpose of this study is the development of a greater understanding of self-esteem in women with physical disabilities. The study examines the effectiveness of a psycho-educational, peer-facilitated workshop intervention designed to enhance the self-esteem of women with physical disabilities. The goal is to increase self-esteem while concurrently learning about ways to build relationship skills. Specific subgoals are to understand the impact of gender and disability role socialization, increase self-awareness and self-understanding, increase self-nurturance, understand health relationships and boundaries, learn about communication skills and consumer advocacy, and integrate and apply skills. Peer leaders facilitate the program. The project also documents and widely disseminates information about the self-esteem of women with physical disabilities, to women with disabilities, independent living counselors, and mental health professionals.

Longitudinal Study of Early Intervention Costs, Effects, and Benefits for Medically Fragile Infants, Children with Disabilities, and Their Families

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Project Number: H133G70190
Start Date: June 1, 1997
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $124,996; FY 98 $124,987; FY 99 $124,993

Abstract: This project gathers descriptive longitudinal information on a well-characterized sample of medically fragile infants, children with disabilities, and their families to evaluate the effects and cost benefits of varying levels of early intervention. No comparable data sets exist. The 400 subjects the investigators are to re-evaluate currently range in age from 7 to 16 years. The current longitudinal study has already examined the costs of the various levels of intervention that were employed when the study subjects were preschool-aged. The research methodology has the capacity to judge the effectiveness of various models of intervention (e.g., parent involvement), as well as the economic benefits of those models.

E*ability.com

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http://abilityforum.com

Principal Investigator: Dawn Golden
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Project Number: ED-99-PO-4698
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000
Abstract: E*ability.com is an Internet-based job opportunity network and support Web site for people with disabilities. The Web site, available at www.abilityforum.com, includes three main areas: employment, reference materials, and avenues for social support. The job database, resume posting, and interviewing forums focus on the category of jobs that can be performed from a remote location. The reference area allows the user to search through products and services. Users may also post their products or services for sale. The social support area provides opportunities for discussion through chat rooms and pen pal mail, delivery of special video training or cultural events, classified ad postings, and entertainment. The fully accessible Web site is designed for use by people with a variety of disabilities.

Small Business Innovative Research (SBIR Phase I)
Ohio

Online Delivery of a Blended Arithmetic Curriculum for Special Education Students

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Project Number: ED-99-PO-4697
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000

Abstract: This project develops a Blended Arithmetic Curriculum that combines constructivist and back-to-basics features, and is designed to encourage special education students' understanding of math principles. The enhanced curriculum includes an online interactive component. Each of the fourteen lesson plans for the Blended Arithmetic Curriculum consists of four components: (1) a constructivist conceptual lesson plan; (2) a back-to-basics fluency-building worksheet that students must complete independently at their seats or at home; (3) a "blended" online computer "game" that builds conceptual understanding and fact retrieval fluency and is used as a reward for students that successfully complete their worksheets; and (4) an online message board where teachers can communicate. Three Cleveland Empowerment Zone elementary schools evaluate the six-month course on basic addition for second grade special education students. Research issues include feasibility of the Blended Arithmetic Curriculum; accessibility of the technology and curriculum to special education teachers; and how well the curriculum and technology improves special education students' addition skills.

A Beginning Sign Language Video-Based Course for Hearing Children Who Are Beginning Learners

Ready! Set! Sign!! Inc.
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Principal Investigator: Daniel Burch, PhD
Public Contact: Martin Noretsky, PhD, 703/820-5730

Project Number: ED-99-PO-4808
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $50,000

Abstract: This project examines the feasibility of designing a video-based beginning Sign Language course for children, incorporating the effective instructional concepts and strategies reflected in the Ready! Set! Sign!! instructional product for adult learners. This course of instruction for hearing children is intended to address directly the problem of the poor communication between deaf and hard-of-hearing children and the hearing children with whom they come in contact, both in mainstreamed school settings and in the community in general. The instructional prototypes under investigation in this feasibility study are based on research studies demonstrating the effectiveness of using the iconic characteristics of signs as a major instructional teaching tool. Of particular interest are studies suggesting iconicity as an effective teaching tool, whether the learner is a first-grader or a college student.

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Small Business Innovative Research (SBIR Phase I)
West Virginia

The Effects of Web-Based Training: A Study Examining Knowledge Acquisition, Teacher Attitude, and Skill Integration

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Project Number: ED-99-PO-4653
Start Date: September 1, 1999
Length: 6 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $45,532
Abstract: This research investigates the development, implementation, and effectiveness of providing educators online training in addressing the needs of students with disabilities. Research issues include attitudes toward Web-based training, knowledge acquisition, and the classroom integration of acquired skills. Two Web-based courses, developed using Authorware 5.0, are delivered over the Internet, and accessible through a Web browser. With the increasing inclusion of students with disabilities into regular education settings, more educators are faced with addressing this population's challenging and specific needs. These educators may not be specifically trained and/or knowledgeable of the disability area of their particular student; therefore, the need for immediate, specific training in addressing the needs of that student is great. The resulting training system offers an online package of training courses available to school districts and community organizations at a subscription or per-course rate at a fraction of the cost of traditional training.

Small Business Innovative Research (SBIR Phase II)
Colorado

Visual Assistant: A Portable Multimedia Training System for Community-Based Skill Development for Individuals with Mental Retardation

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Project Number: ED-99-CO-0124
Start Date: September 1, 1999
Length: 24 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $249,997

Abstract: This project builds on the successful results of previous research to: (1) complete the Visual Assistant multimedia software program, a Windows CE-based multimedia trainer for training specific community integration skills to individuals with mental retardation; (2) build a companion software application for the PC that helps manage the setup of the Visual Assistant training tasks; and (3) perform expanded field testing of the system to evaluate its applicability for a wide range of activities of daily living and levels of disability. Probably one of the most exciting aspects of the Visual Assistant system is its promise for reducing the need for human assistance when performing activities of daily living. Activities that have been too difficult without assistance from a caregiver or counselor can be programmed into the portable Visual Assistant system to help the individual perform the task independently, maybe for the first time.

Strategies for Test Success: A CD-ROM for Students with Learning Disabilities

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Project Number: ED-99-CO-0125
Start Date: September 1, 1999
Length: 24 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 99 $250,000
Abstract: This novel instructional program on CD-ROM teaches test-taking strategies to students with learning and attention difficulties. The Strategies for Test Success (STRATS) program allows students to learn and practice test-taking strategies within a motivating, multidimensional, structured format. Test-taking deficiencies represent a major hurdle for students with learning disabilities who are now confronted with new barriers to academic success resulting from the recent introduction of standards-based testing in many states. Improvements in test-taking strategies can help students with learning disabilities to perform at the level of their potential and to attain greater academic success which, in turn, prevents the high frustration levels that so often lead to school dropout, delinquency, and unsuccessful employment histories in this population.

Associated Disability Research Areas

Related disability research emphasizes knowledge areas that are cross-cutting and essential to the support and refinement of disability research generally. The common theme linking disability statistics, outcome measures, and the emerging fields of disability studies, rehabilitation science, and disability policy research is that they all provide essential frameworks and building blocks for the research and address important issues in a meaningful way.

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American Indian Rehabilitation Research and Training Center

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Project Number: H133B980049
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000; FY 99 $605,000
Abstract: This Center, in a collaboration that includes the Consortia of Administrators for Native American Rehabilitation (CANAR) and other Rehabilitation Research and Training Centers, develops, implements, and conducts research and training activities around four core areas. Eight research projects and six training projects focus on: (1) investigating and analyzing existing disability and employment data, and recommending methodology for planning and evaluating employment services for American Indians and Alaska Natives; (2) recommending successful strategies to improve employment outcomes, including existing employment and vocational rehabilitation service practices American Indians and Alaska Natives with disabilities on or off reservations; (3) developing and evaluating innovative and culturally appropriate vocational rehabilitation services for the employment of American Indians and Alaska Natives; and (4) disseminating results of the data collection and evaluation of model employment services to a range of relevant audiences, using appropriate accessible formats. Consultation with researchers, CANAR, and the training team helps develop a dissemination method that is accessible and acceptable for each respective target community. Information and resources are developed and disseminated to providers, tribal and state vocational rehabilitative agencies, consumers, and Regional Continuing Education Programs.

Disability Statistics Rehabilitation Research and Training Center

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Project Number: H133B980045
Start Date: December 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $700,000; FY 99 $700,000
Abstract: The Center conducts research in the demography and epidemiology of disability including costs, employment statistics, health and long-term care statistics, statistical indicators, and congregate living statistics. Statistical information is disseminated through published statistical reports and abstracts, journals, professional presentations, and a publications mailing list. Training activities and resources (such as a predoctoral program) disseminate scientific methods, procedures, and results to both new and established researchers, policymakers, and other consumers, and assist them in interpreting statistical information. A National Disability Statistics and Policy Forum is conducted periodically to foster dialogue between people with disabilities and representative organizations, researchers, and policymakers.

Rehabilitation Research and Training Center on Policies Affecting Families of Children with Disabilities

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Project Number: H133B980050
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $650,000; FY 99 $650,000
Abstract: This project assesses policies and services and their impact on families' quality of life, focusing on four priorities: (1) developing an analytical framework for policy and service analysis; (2) developing measurement tools that apply state-of-the-art legal and policy analysis methodologies to the assessment of policies, service systems, and family outcomes; (3) identifying impacts of partnership (including interagency collaboration and coordination) on family outcomes; and (4) conducting research with families from diverse backgrounds in several communities and states (Kansas, Louisianna, North Carolina). This research agenda is composed of five comprehensive training projects, six dissemination projects, and five technical assistance projects. Training activities include: (a) preservice training and the preparation of three textbooks; (b) inservice training that helps service providers and families form community coalitions using the measurement toolkit; and (c) sponsorship of an international state-of-the-science conference. Dissemination activities include: (a) networking with federal agencies; (b) developing and disseminating the measurement toolkit, six users' manuals, and a management information software package; and (c) publishing articles in peer-reviewed newsletters, research briefs, fact sheets, a Web site, and a newsletter. Technical assistance focuses on: (a) enhancing federal and state policies; (b) conducting summer institutes with state-local partners on policy and service analyses; and (c) developing partnerships with federal agency liaisons, grantees, and key family and professional organizations to mentor them in using the results of project research to enhance policies and services.

Rehabilitation Research and Training Center on Measuring Rehabilitation Outcomes

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Project Number: H133B990005
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $699,736
Abstract: This Center develops new, more effective outcomes measurement tools and applies these tools to determine the effectiveness of medical rehabilitation interventions. Research components include: (1) identifying gaps in existing outcome measures and developing new instruments that address these gaps as part of a rehabilitation outcomes system; (2) critically evaluating the newly developed instruments against tools currently in use; (3) implementing the newly developed outcome instruments across impairment groups and across rehabilitation settings to assess their feasibility, responsiveness, and validity; (4) investigating the extent to which specific rehabilitation interventions affect outcomes following the onset of a stroke; and (5) applying modern psychometric techniques to develop dynamic outcome instruments that can also be used with individual patients in a clinical setting. Several components have been designed to enhance the translation of research findings into rehabilitation practice and to provide stakeholders with the opportunity to provide input into the Center including surveys of the use of medical rehabilitation outcomes data, consensus conferences, institutes, fellowships, a Web site, and a consumer guide to choosing postacute care services.

Center on Emergent Disability: A National Study on the Changing Impact of Major Demographic, Health, Social, and Economic Trends on the Manifestation of Disability

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Project Number: H133A990017
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 99 $250,000
Abstract: The Center on Emergent Disability at the University of Illinois/Chicago is a national research effort that seeks to characterize the changing impact of major demographic, health, social, and economic trends on the manifestation of disability in America. Core activities of the Center include: (1) state level analysis of changes in the etiology of disability through a systematic canvas and analysis of state public health surveillance systems; (2) evaluation of the implications of change from the perspective of implications for service delivery at the local level in conjunction with state-wide disability planning councils in Florida, Illinois, New Jersey and Texas; (3) study of political identity and coalition building with these constituencies and their relationships to the development of policies in state human services infrastructure; (4) a series of secondary analyses of national health and economic data sets to profile the character of changes in the population of Americans with disability; and (5) an integrated framework for monitoring and reporting medical and diagnostic research on "newly emergent" conditions. The goal is to develop a model of evolving risk and its impact on population change, state-wide agenda formation, planning, policy choice, and implementation against the backdrop of emergent conceptions of disability.

The Empowerment Project: Promoting Equality for People with Disabilities Through Electoral Participation

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Project Number: H133G990188
Start Date: August 15, 1999
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $145,458
Abstract: The Empowerment Project is a three-year program of research and dissemination activities that address and reduce a variety of barriers to voting. People with disabilities constitute the largest minority group in the United States, but their voice in American democracy is faint; the outcomes of this project include: new knowledge based on comparative legal analyses of voting rights legislation for racial minorities, women, and people with disabilities; a study of implementation of the National Voter Registration Act (NVRA) by disability service agencies; strategies for improving implementation of the NVRA; new knowledge regarding the effects of state-level differences in election practices on the electoral participation of people with disabilities; a study of the needs and preferences of people with disabilities with respect to registration and voting practices; strategies for use by state and local election officials to promote accessibility in registration and voting; and a National Summit on Electoral Participation by People with Disabilities to promote the use of project results and products.

The Disabled Persons' Independence Movement: The Formative Years in Berkeley California

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Project Number: H133G60193
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $125,000; FY 97 $125,000; FY 98 $125,000; FY 99 (No-cost extension through 2/28/00)

Abstract: This project develops a research platform that documents, preserves, and makes accessible to researchers a major segment of the history of the independent living movement and the struggle for civil rights by people with disabilities. The project conducts oral history research and collects written and visual documentation of the formative years of the movement in Berkeley California, and its interrelations and influences nationwide. It establishes a plan and process for ongoing documentation of key organizations in the Berkeley area serving people with disabilities both regionally and nationally. All research materials are archived in the Bancroft Library at the University of California at Berkeley.

Disability Rights Leadership Archive

University of San Francisco
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Project Number: H133G60192
Start Date: September 1, 1996
Length: 36 months
NIDRR Officer: Sean Sweeney, PhD
NIDRR Funding: FY 96 $138,277; FY 97 $138,277; FY 98 $124,836; FY 99 (No-cost extension through 2/29/00)

Abstract: This project: (1) ensures the survival of archival materials documenting the history of the disability rights movement; (2) fosters disability studies by increasing access to and use of these materials through the creation of the *Scholar's Guide to Disability Rights Media Sources,* the *Disability Rights Timeline,* research papers, and a series of taped interviews with leaders of the disability rights community who were intrumental in the passage of the Americans with Disability Act (ADA); and (3) increases public awareness and understanding of the disability rights movement by furthering the development of the television program *Created Equal,* that presents, for the first time to the American public, a comprehensive, historically accurate view of disability rights, in the most widely used learning vehicle, television. The project is led and staffed by people with disabilities, academic and documentary experts, and graduate students in the field.

Re-Defining Wholeness: Formulating A Minority Group Model of Disability Identity Development

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Project Number: H133G990110
Start Date: May 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,915

Abstract: The project constructs and validates a theoretical model of disability identity development analogous to models formulated for ethnic, racial, gay/lesbian, and women's identity development. The model has significant value in generating testable hypothesis in disability research by contributing a more refined and differentiated understanding of intragroup developmental differences. The goals of the project are: (1) to illuminate the process by which people with disabilities develop a positive identity that integrates their disability status, resulting in a sense of wholeness that fortifies both their resilience to social devaluation and their efforts to live fully in society; (2) to formulate a comprehensive model of disability identity development that takes into account the experiences of people with various disabilities from a range of social/cultural backgrounds; (3) to validate the model by testing predicted relations between disability identity categories and other variables that are theoretically relevant to identity development; (4) to use the model to investigate how people with disabilities who also have other minority group status (based on race, ethnicity, gender, or sexual orientation) develop disability identity, and organize their intersecting identities and multiple group affiliations; and (5) to disseminate this information to people with disabilities, their families, professionals, and advocates so it can be used to support positive identity development in children, adolescents, and adults with disabilities.

Equiprecise Measurement for ICIDH-2 Classification of Activity: An Innovative Solution for Evaluating the Worldwide Incidence and Prevalence of Disability

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Project Number: H133G990167
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,644

Abstract: This project develops an efficient and precise activity measurement system that is accessible and useful to individuals with disabilities, consumer groups, health care service providers, and policy makers. In the context of people with musculoskeletal/connective tissue disorders or orthopedic impairments, Rasch analysis and Computerized Adaptive Testing (CAT) techniques are used, applying equiprecise measurement to the categories of movement, moving around, and daily life activities as defined in the Activity dimension of the ICIDH-2. The World Health Organization defines its Activity dimension as functioning at the level of the person; CAT achieves efficiency by selectively presenting questions at the individual's ability level, and equiprecise measurement refers to the potential to have high precision in measuring a trait or construct across the entire range of that trait or construct.

A Multi-Level Analysis of the Relationship Between Domestic Violence and Disability

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Project Number: H133G990144
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: Constance Pledger
NIDRR Funding: FY 99 $149,853

Abstract: The nature of this study is to understand the intersection between domestic violence and disability. All subjects are female adult victims of domestic violence, including detailed case studies of 10 women who are domestic violence victims with a disability, interviewed and observed in routine activities of daily living over a two-year period. This project is designed to begin building an understanding of the relationships and consequences of domestic violence and disability through a multimethod approach. Research objectives are: (1) to document the extent and nature of impairment/disability among women who are identified as victims of domestic violence in a municipal hospital; (2) to document the disability-related characteristics of women who present to an emergency shelter for domestic violence; and (3) to disseminate project findings in appropriate formats to policy makers, service providers, and consumers.

Studies of Persons with Developmental Disabilities Within the Sample of the 1994-95 Disability Supplement to the National Health Interview Survey

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Project Number: H133G980082
Start Date: July 1, 1998
Length: 24 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $76,066; FY 99 $73,673

Abstract: This project extracts, analyzes, and disseminates data on people with developmental disabilities from the 1994-95 Disability Supplement to the *National Health Interview Survey*. The combined 1994 and 1995 Disability Supplement and the core *National Health Interview Survey* for those years make up the most comprehensive survey of noninstitutionalized people with disabilities ever conducted in the United States and the first national survey to include people with disabilities of all ages. Project researchers analyze the data to determine the following related to people with developmental disabilities: (1) prevalence in the United States; (2) demographic, functional and health characteristics, including specific conditions and multiple impairments; (3) services, devices, and technology needed and used; (4) social and employment experiences; (5) public and private health and personal assistance coverage status; (6) living arrangements in noninstitutional settings; (7) in-home formal and informal supports needed and received; (8) variations in these or other areas that may be associated with factors such as age, severity of disability, racial or ethnic background, or place of residence; and (9) in-depth analyses of critical issues such as unserved and underserved individuals waiting for services, characteristics and qualities of direct support staff members in in-home settings, and guardianship status for adults with developmental disabilities. Results are disseminated to policy makers and advocacy groups and tailored analyses are conducted as requested by federal agencies and other groups. Comprehensive project reports are distributed in both print form and electronically on the University of Minnesota Institute on Community Integration Web site.

Knowledge Dissemination and Utilization

Dissemination and utilization are the tools through which to ensure that people with disabilities become fully integrated and participating members of society. NIDRR's dissemination and utilization efforts ensure the widespread distribution, in usable formats, of practical scientific and technological information generated by research, demonstration, and related activities. NIDRR's challenge is to reach diverse and changing populations, to present research results in many different and accessible formats, and to use technology appropriately.

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National Resource Center for Parents with Disabilities

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Project Number: H133A980001
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $500,000; FY 99 $500,000

Abstract: The National Resource Center for Parents with Disabilities focuses on the 10.9 percent of U.S. families with children in which one or both parents have a disability—nearly 9 million parents. The Center provides: (1) accessible and disability-appropriate information regarding parenting with a disability to parents, potential parents, disability advocates and legal, medical, and social service providers; (2) training to parents with disabilities, potential parents, and service providers; (3) technical assistance that increases informed practice and informed decisions; (4) program consultation that increases local and regional services that are accessible and disability-appropriate. To accomplish these goals, project researchers: (1) consolidate and disseminate information and resources; (2) synthesize and disseminate materials from other agencies and organizations; (3) develop and disseminate new materials tailored to address the specific needs of parents with disabilities and service providers; (4) expand the national availability of training and technical assistance to parents with disabilities and service providers; and (5) develop curricula to train future service providers. Parenting areas designated as highest priority are: custody, pregnancy and birthing, adoption, adaptive parenting equipment, and general parenting information. The project is staffed by nationally recognized experts regarding parents with disabilities, the majority of whom are parents with disabilities or family members of parents with disabilities.

Ideas for the New Millennium

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Project Number: H133A990006
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Eva M. Gavillán, EdD
NIDRR Funding: FY 99 $400,000
Abstract: This project creates a productive international exchange of information and expertise on disability and rehabilitation, connecting disability research and advocacy leadership in ten target countries with their peers in the United States. At the heart of this exchange is an online information system that captures innovation, links government officials, policymakers, disability leaders, rehabilitation specialists, researchers and innovators in a lively exchange of ideas, networks, resources, and contacts. This sustainable network of information and resources on substantive disability issues is available across professions, cultures and communities. The issues critical to the information exchanges are: (1) disability rights and independent living; (2) employment and entrepreneurial activity; (3) access and technology; (4) mass media images; and (5) influence through governance. Using a civil rights perspective, the project addresses disability policy, law, advocacy, research, and related developments in the ten countries. The project systematically promotes international exchange, reports results, and analyzes their significance in consumer-friendly formats and forums, including a comprehensive database, five annual symposia, as well as a monthly webzine and online exchange of information in English and Spanish. The project collaborates with five disability-led organizations with substantial international experience.

Disability and Rehabilitation Research Project to Disseminate Independent Living Research Information Through the Mass Media to Persons with Disability

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Project Number: H133A980045
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,991; FY 99 $299,994

Abstract: This project disseminates research information on Independent Living (IL) through the popular mass media. Like many groups who rely on well-planned programs of media dissemination involving media relations firms, this project hires and works proactively with a media relations firm and selected researchers to obtain coverage of IL issues in the popular mass media. The goal is to create the recognition that the target population and its issues require ongoing serious coverage. The project conducts a proactive "media watch" to identify opportunities to insert an IL perspective into public debates on policy issues in the popular mass media. As part of that watch, the project establishes a "rapid response" program to provide members of the popular mass media with resources among IL researchers, and to generate a response from the IL community to stories that omit the IL perspective. The project develops an interactive Web site to provide information and resources about IL research to members of the popular mass media, researchers, and consumers.

TECH CONNECTIONS: Improving the Utilization of Existing and Emerging Rehabilitation Technology in the State Vocational Rehabilitation Program

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Project Number: H133A980052
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $499,970; FY 99 $500,000
Abstract: TECH CONNECTIONS facilitates the use of rehabilitation technology in state vocational rehabilitation (VR) programs. This customer-responsive, customer-driven training, technical assistance, and dissemination project features: (1) a multifaceted approach to training that builds capacity through new curricula and new supporting materials that augment existing materials, for use by project-trained rehabilitation and university staff; (2) regional "Train-the-Trainer" forums, topic-specific audio conferences, and satellite video training; (3) individualized technical assistance and information about the assistive technology, on a case-by-case basis, for rehabilitation professionals and for their customers with disabilities; and (4) broad-based outreach and dissemination to people who provide assistive technology. Training includes an Internet-based discussion group open to rehabilitation professionals, people with disabilities, and other interested parties and a mentoring program pairing experienced technology users with rehabilitation professionals or people with disabilities seeking assistive technology. Additional methods of outreach include project announcements circulated to rehabilitation, education and disability Internet discussion lists; presentations at conferences and workshops; a tollfree phone number; and an Internet-based newsletter. United Cerebral Palsy Association works in collaboration with the Center for Rehabilitation Technology and the Southeast Disability and Business Technical Assistance Center.

Improving Research Information Dissemination and Utilization to Promote Independent Living

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Project Number: H133A980048
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,999; FY 99 $299,999

Abstract: This project increases the amount of relevant and useful independent living (IL) information to consumers to enable them to reach their IL goals more effectively. Activities include: (1) identifying needs and barriers, how input from consumers can help remove them, and using this knowledge to create a research primer; (2) developing an information infrastructure for research that includes a searchable and interactive IL database and uses existing Internet tools such as chat rooms and Internet discussion lists; (3) providing technical assistance to consumers, family members, policy makers, and practitioners; (4) training practitioners and advocates to provide technical assistance; and (5) assisting researchers in developing research reports for consumers, family members, and practitioners involving consumers in their research. These research, development, dissemination, utilization, and technical assistance components provide more effective and economical dissemination of IL research to people with disabilities and family members. This project is partnered with the Independent Living Research and Utilization Project at The Institute for Rehabilitation Research (TIRR).

ABLEDATA Database Program

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Project Number: HN96015001
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 96 $269,522; FY 97 $269,522; FY 98 $269,522; FY 99 $269,522
Abstract: This project maintains and expands the ABLEDATA database, develops information and referral services that are responsive to the special technology product needs of consumers and professionals, and provides the data to major dissemination points to ensure wide distribution and availability of the information to all who need it. The ABLEDATA database contains information on more than 25,000 assistive devices, both commercially produced and custom made. Requests for information are answered via telephone, mail, electronic communications, or in person.

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National Rehabilitation Information Center (NARIC)

KRA Corporation
1010 Wayne Avenue, Suite 800
Silver Spring, MD 20910
naricinfo@kra.com
http://www.naric.com

Principal Investigator: Mark X. Odum
Public Contact: Information Specialists, 800/346-2742 (V); 301/562-2400 (V); 301/495-5626 (TTY); Fax: 301/562-2401

Project Number: ED-99-CO-0057
Start Date: February 1, 1999
Length: 34.5 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $736,876

Abstract: The National Rehabilitation Information Center (NARIC) maintains a research library of more than 53,000 documents and responds to a wide range of information requests, providing facts and referral, database searches, and document delivery. Through telephone information referral and the Internet, NARIC disseminates information gathered from NIDRR-funded projects, other federal programs, and from journals, periodicals, newsletters, films, and videotapes. NARIC maintains REHABDATA, a bibliographic database on rehabilitation and disability issues, both in-house and on the Internet. Users are served by telephone, mail, electronic communications, or in person.

Center for International Rehabilitation Research Information and Exchange (CIRRIE)

State University of New York (SUNY) at Buffalo
Center for Assistive Technology
515 Kimball Tower
Buffalo, NY 14214
jstone@acsu.buffalo.edu
http://cirrie.buffalo.edu

Principal Investigator: John Stone, PhD
Public Contact: 716/829-3141; Fax: 716/829-3217

Project Number: H133A990010
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Eva M. Gavillán, EdD
NIDRR Funding: FY 99 $400,000
Abstract: The mission of this Center is to improve rehabilitation services by obtaining and disseminating information on international rehabilitation research and practices. CIRRIE has four primary objectives: (1) develop and maintain an international research database, searchable from an accessible Web site, organized according to the major types of rehabilitation research, as delineated in the NIDRR Long-Range Plan; (2) assist grantees of the Office of Special Education and Rehabilitation Services (OSERS) to establish an international component within their domestic conferences by facilitating and subsidizing participation by international experts and involve U.S. experts in international conferences; (3) conduct an international exchange of research and technical assistance experts based on requests from rehabilitation research centers in the U.S. and other countries; and (4) disseminate information to rehabilitation service providers on the cultural issues relevant to meeting the needs of recent immigrants. Publications include monographs addressing the relevant cultural issues for the top ten countries of origin of foreign-born people in the U.S. The monographs are based on a model of the service provider as a "culture broker," with the first monograph in the series addressing the theory of culture brokering and its relevance to rehabilitation practice. A workshop on this topic is also available.

National Resource Center on Supported Living and Choice for People with Mental Retardation and Developmental Disabilities

Syracuse University
Center on Human Policy
805 South Crouse Avenue, Room 101
Syracuse, NY 13244-2280
thechp@sued.syr.edu
http://soeweb.syr.edu/thechp

Principal Investigator: Steven J. Taylor, PhD, 315/443-3851
Public Contact: Bonnie Shoultz, Associate Director; Rachael A. Zubal, Information Coordinator, 800/894-0826 (V); 315/443-3851 (V); 315/443-4355 (TTY); Fax: 315/443-4338

Project Number: H133A990001
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $400,000

Abstract: This project conducts information dissemination, training, and technical assistance on community inclusion, with a specific focus on supported living and choice. The Center identifies and documents innovative policies and practices for home ownership, self-directed support services, self-determination, self-advocacy, and community participation. Activities include the preparation of information materials for direct support staff, a national survey of state funding for supported living, a disability studies scholars program to encourage advanced students at Historically Black Colleges and Universities to pursue careers in disability-related fields, and increased efforts to address the needs of historically under-represented groups. The project maintains an information clearinghouse on supported living and choice and disseminates resource material targeted to people with developmental disabilities, family members, professionals, direct services staff, policy makers, and providers. It offers assistance and support to Self-Advocates Becoming Empowered, state and local providers, developmental disability councils, and protection and advocacy agencies. In providing technical assistance to states, the Center coordinates its efforts with the National Home of Your Own Alliance and the Robert Wood Johnson Self-Determination Initiative, both at the University of New Hampshire.

National Center for the Dissemination of Disability Research (NCDDR)

Southwest Educational Development Laboratory
211 East Seventh Street, Suite 400
Austin, TX 78701-3281
lharris@sedl.org
http://www.ncddr.org

Principal Investigator: John Westbrook, PhD, 512/476-6861
Public Contact: Lin Harris, Information Assistant, 800/266-1832 (V/TTY); Fax: 512/476-2286

Project Number: H133A990008
Start Date: September 30, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $750,000
Abstract: The National Center for the Dissemination of Disability Research (NCDDR) helps to close the gap between the production of disability research and its use. The project addresses four objectives: (1) to assure access to NIDRR funded research findings by diverse public audiences, with particular attention to people with emerging disabilities, minorities with disabilities, and people living in poverty; (2) to increase the use of effective dissemination and utilization strategies among grantees funded by NIDRR; (3) to increase dissemination-related coordination and information-sharing among NIDRR grantees; and (4) to strengthen the capacity of NIDRR grantees to address the needs of their intended audiences. Research includes surveys, focus groups, and other data collection to clarify information needs among people with disabilities and their families, describe barriers that prevent their access to research outcomes, and obtain descriptions of researchers' approaches to setting research priorities and disseminating their results. Dissemination and utilization activities include a variety of supports for dissemination to people with disabilities, service and community-based agencies, advocacy organizations, and disability and mainstream media. The project focuses extensively on innovative approaches to electronic media, but also addresses the needs of consumers, service agencies, and others who still lack the electronic access. Technical assistance is targeted specifically to NIDRR grantees. NCDDR staff provide information, training, and consultations in response to requests via toll-free telephone, electronic mail, the World Wide Web, and print media. In addition, the Center takes a pro-active role in offering technical assistance in specific areas.

Total Access: An Innovative System to Provide Destination Accessibility Information for Children and Adults with Disabilities

Meeting the Challenge, Inc.
3630 Sinton Road, Suite 103
Colorado Springs, CO 80907-5072
going@mtc-inc.com
http://www.mtc-inc.com

Principal Investigator: Patrick Going
Public Contact: 719/444-0252; Fax: 719/444-0269

Project Number: H133G980013
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 98 $124,917; FY 99 $124,904

Abstract: This project develops and tests the technical feasibility and merit of a system that provides access information about destinations in the Colorado area. Accessibility information about destinations is a critical issue for people with disabilities and their parents, teachers, and friends. When information is unavailable or inaccurate, many people with disabilities are restricted from participating in stimulating activities, especially those involving people without disabilities. Through the use of standardized documentation, a City-Line-like telephone audiotex service, and Internet Web sites, the design phase of this effort produces prototypes of destination access information for several locations. The project reviews a wide range of destination information sources to identify the elements described and types of information presented about each element. The project then develops a survey instrument to be completed by a number of requirements analysis teams, composed of people with disabilities, their associates, and destination site managers.

Illinois Joint Training Initiative on Disability and Abuse: Advocacy and Empowerment Through Knowledge Dissemination

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
nfitzs1@uic.edu; cedrum@uic.edu
http://www.uic.edu/depts/idhd

Principal Investigator: Nancy Fitzsimons-Cova, PhD
Public Contact: Michael Wonderlich, Project Coordinator, 312/413-8833; Fax: 312/413-2918

Project Number: H133G70124
Start Date: August 1, 1997
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 97 $123,990; FY 98 $125,000; FY 99 $124,998

Abstract: This project provides information and skills to advocates, consumers, family members, service providers, and others to empower them to enforce the rights of adults with disabilities who have been abused or neglected. It is largely a training project whose objectives include: (1) developing interactive consumer-responsive materials that train consumers, family members, and service providers to recognize incidents; (2) making the social and legal system respond to cases; (3) providing referral to resources available for victims; (4) conducting state-wide training using the materials; (5) providing each training participant with the opportunity to become a local trainer on these issues; and (6) providing technical assistance, materials, and resources to local trainers hosting training events.

Field-Initiated Projects (FIPs)
Kansas

A Knowledge Dissemination Project to Enhance the Transfer of Rehabilitation Engineering and Assistive Technologies to People with Disabilities

Cerebral Palsy Research Foundation of Kansas
5111 East 21st Street
Wichita, KS 67208
leonarda@cprf.org
http://www.atsolutions.org

Principal Investigator: Leonard Anderson
Public Contact: 316/688-1888; Fax: 316/651-5206

Project Number: H133G80077
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $124,999; FY 99 $124,999
Abstract: This project uses information dissemination mechanisms to expand the availability of assistive technologies that enrich the quality of life of people with disabilities. Goals of the project are: (1) to encourage technology originators and developers to disseminate information, and to facilitate dissemination actions regarding assistive devices and modifications to consumer technology; (2) to improve the quality and reliability of the design and fabrication of assistive devices; (3) to disseminate information about available products and technology to people with disabilities, family members, and professionals; (4) to facilitate better use of local resources for fabricating technology devices, with a focus on assistive technology devices; (5) to improve the usefulness and effectiveness of the devices; (6) to ensure that legal implications of providing engineering information on assistive technology devices are addressed in a satisfactory, cost-effective manner; and (7) to ensure that people with disabilities are involved in the project's activities and goals. A Web site has been established to disseminate information.

Development of a Consumer-Responsive Resource on Assistive Technology Information

Macro International, Inc.
11785 Beltsville Drive, #300
Calverton, MD 20705
lowe@macroint.com
http://www.abledata.com

Principal Investigator: Robert Gold; Lynn Halverson
Public Contact: Stephen Lowe, 301/572-0887; Fax: 301/572-0999

Project Number: H133G80048
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $124,969; FY 99 $124,919

Abstract: This project establishes "AT in the Media," a database of up-to-date resources on comparative assistive technology information. Since this project works in conjunction with the existing ABLEDATA project, consumers with disabilities can access the new database through the ABLEDATA Web site and through access to ABLEDATA information specialists. Sources for the database include articles from consumer-oriented periodicals, trade publications, and professional journals. Other multimedia resources are also abstracted. The resources are organized in two Web site areas called the Reading Room and AT Forum. To ensure that they meet consumer information needs about assistive technology, these areas are developed with consumer input and advice. In addition, two new Web-based resources are developed to enable consumers and service providers to obtain information from other consumers or experts.

Seeking, Screening, Evaluating, Describing, and Disseminating Approaches Used by Two-Year Colleges to Serve Rehabilitation Services Clients with Severe/Multiple Functional Limitations in Highly Effective Ways

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University of Wisconsin/Madison
Center on Education and Work
964 Educational Sciences Building
1025 West Johnson Street
Madison, WI 53706
jgugerty@education.wisc.edu
http://www.cew.wisc.edu/nidrr

Principal Investigator: John Gugerty
Public Contact: 608/263-2724; Fax: 608/262-3050

Project Number: H133G70073
Start Date: June 15, 1997
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $124,904; FY 98 $124,885; FY 99 $124,973

Abstract: This project improves the ability of two-year colleges to serve rehabilitation clients and other students with significant disabilities by providing ready access to current, detailed descriptions of highly effective approaches other two-year colleges use to serve these populations. Community colleges and technical colleges offer opportunities for students to learn skills that pay a living wage, and they are the postsecondary education venue of choice for state and federal rehabilitation-services professionals when their clients' Individual Plans for Employment (IPEs) call for skill training. This project serves rehabilitation professionals, parents, individuals with severe and multiple limitations, special educators, vocational educators, and regular educators who wish to: (1) address and solve the continuing unemployment and underemployment problems of individuals with severe/multiple functional limitations; and (2) strengthen the approaches used by two-year colleges to serve rehabilitation clients and other students with severe/multiple functional limitations. The project obtains information, synthesizes it, makes it widely and readily available in print, electronic, and other alternative formats, and provides training and technical assistance to individuals wishing to replicate or adapt these approaches.

Small Business Innovative Research (SBIR Phase II)
California

Trails Web Site with Universal Access Information

Beneficial Designs, Inc.
5858 Empire Grade
Santa Cruz, CA 95060
mail@beneficialdesigns.com
http://www.beneficialdesigns.com

Principal Investigator: Peter W. Axelson; Denise A. Chesney
Public Contact: 831/429-8447; Fax: 831/423-8450

Project Number: ED-98-CO-0046
Start Date: October 1, 1998
Length: 24 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $125,000; FY 99 $130,053
Abstract: This project develops the Trails Web site to provide universal access information for trails throughout the United States, making the site useful to all hikers, regardless of their ability. The Universal Trails Assessment Process enables trail managers to assess specific trails objectively with regard to grade, cross slope, width, surface characteristics, and obstacles. The collected trail data is processed to create Trail Access Information in a format similar to a Nutrition Facts food label. The Trails Web site contains Trail Access Information on numerous hiking trails and allows users to search for trails that meet their specific access needs.

The Adaptive Device Locator System on the World Wide Web

Academic Software, Inc.
331 West Second Street
Lexington, KY 40507
asistaff@acsw.com
http://www.acsw.com/adlsweb1.html

Principal Investigator: Warren E. Lacefield, PhD; Penelope D. Ellis
Public Contact: 606/233-2332; Fax: 606/231-0725

Project Number: RW980370
Start Date: October 1, 1998
Length: 24 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000

Abstract: This project transforms the Adaptive Device Locator System (ADLS), a unique and valuable national resource, into a searchable World Wide Web site on the Internet. The planned format is universally accessible to teachers, health professionals, and consumers with disabilities. The finished site lists adaptive and assistive technology products that companies provide. Vendor links allow ADLS visitors to jump directly to other commercial sites once appropriate assistive technology devices are located. ADLS on the Web focuses on international trade and hopes to be an export leader. It also features monthly infomercials, new product announcements, and other information of interest to consumers.

Global Assistive Technology Explorer (GATE)

Center for Rehabilitation Technology
Georgia Institute of Technology
490 Tenth Street
Atlanta, GA 30332-0156
robert.todd@arch.gatech.edu

Principal Investigator: Robert Todd, 404/894-4621
Public Contact: Carol Hughes, 404/894-4283; Fax: 404/894-9320

Project Number: H224B990004
Start Date: November 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $352,000
Abstract: The Global Assistive Technology Explorer (GATE) is a comprehensive, up-to-date, easy to use Internet site on disability-related resources. GATE increases the availability of, and access to, information about assistive technology (AT), services, and resources available for people with disabilities. The GATE website serves people with disabilities, their families, service providers, educators, employers, and members of their communities. The site has been created for maximum access to all users, regardless of ability, software, or hardware. The GATE National Assistive Technology Internet Site features: access to a comprehensive library (a database) of information on AT and rehabilitation equipment available for all environments; an innovative automated intelligent agent to assist users in problem definition and selection of appropriate AT devices and service resources; a vendor data entry interface to ensure up-to-date information on AT and devices; a Web-based meeting place where all people concerned with disability and AT can meet and discuss ideas, problems and solutions; electronic links to appropriate and accessible public and private resources and information related to all types of disabilities, including low-level reading skills.

ADA Technical Assistance Programs

The Americans with Disabilities Act (ADA) opens more opportunities for persons with disabilities. It also places certain responsibilities on employers, transit and communication systems, state and local governments, and public accommodations. To assist covered parties to understand and comply with the ADA, NIDRR has funded a network of grantees to provide information, training, and technical assistance to businesses and agencies with duties and responsibilities under the ADA.

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Developing the Capacity of Minority Communities to Promote the Implementation of the Americans with Disabilities Act

University of Illinois/Chicago
Institute on Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
fabricio@uic.edu; brigidah@uic.edu
http://www.uic.edu/depts/idhd/empower

Principal Investigator: Fabricio E. Balcazar, PhD, 312/413-1646
Public Contact: Brigida Hernandez, 312/996-6824 (V); 312/413-0453 (TTY); Fax: 312/413-1804

Project Number: H133G80074
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $125,995; FY 99 $124,995

Abstract: This project develops, implements, and evaluates the capacity of minority communities to further the implementation of the Americans with Disabilities Act (ADA). The project includes: (1) assisting grass-roots organizations that service the needs of Latinos and African Americans with disabilities in conducting participatory needs assessments; (2) assisting these organizations in setting goals and planning actions to address specific problems identified in the needs assessment process; (3) providing feedback and technical support to these organizations in meeting their goals; (4) providing leadership training and technical support to strengthen the independence and self-reliance of these grass-roots organizations; and (5) conducting research with local independent living centers in minority communities of Chicago, including assessments of ADA physical accessibility and surveys on barriers to employment.

New England Disability and Business Technical Assistance Center - Region I

Adaptive Environments Center, Inc.
374 Congress Street, Suite 301
Boston, MA 02210
vfletcher@adaptenv.org
http://www.adaptenv.org

Principal Investigator: Valerie Fletcher, Project Director, 617/695-1225, ext. 26
Public Contact: 800/949-4232 (V/TTY in CT, ME, MA, NH, RI, and VT); 617/695-1225, ext. 31 (V/TTY); Fax: 617/482-8099

Project Number: H133D60015
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $499,830; FY 97 $538,400; FY 98 $520,000; FY 99 $499,830
Abstract: The New England DBTAC provides technical assistance, training, and information dissemination for Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont. The project's emphasis is on ensuring that the knowledge and skills to implement the ADA are infused within state and local organizations. Contracts with each state and with local independent living centers extend technical assistance capacity throughout the region. The DBTAC uses a toll-free telephone hotline, a World Wide Web site, electronic mailing lists, and audio teleconferencing to extend its reach throughout New England. The project places a strong emphasis on the training of trainers, and has established a Training and Technical Assistance Resource Center that supports trainers and technical assistance providers. A regional advisory board consists of representatives from each state, including centers for independent living, parent programs, seniors, businesses, and state and local governments, and provides guidance, helps prioritize the use of incentive grants, and evaluates DBTAC efforts.

Northeast Disability and Business Technical Assistance Center - Region II

United Cerebral Palsy Associations of New Jersey
354 South Broad Street
Trenton, NJ 08608
dbtacucpanj@aol.com
http://disabilityact.com

Principal Investigator: Jennifer Eckel, 607/255-0780
Public Contact: Huntley Forrester, Project Director, 800/949-4232 (V/TTY, in NJ, NY, PR, and VI); 609/392-4004 (V); 609/392-7044 (TTY); Fax: 609/392-3505

Project Number: H133D60013
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $550,000; FY 97 $469,855; FY 98 $578,000; FY 99 $588,000
Abstract: The Northeast DBTAC provides technical assistance, training, and information dissemination for New Jersey, New York, Puerto Rico, and the Virgin Islands. In this collaborative effort, United Cerebral Palsy Associations of New Jersey functions as the lead agency, providing technical assistance, training, and information dissemination for New Jersey, and coordinating the activities of the satellite program. The satellite is the New York State Office of Advocate for Persons with Disabilities, and serves New York, Puerto Rico, and the U.S. Virgin Islands. Cornell University School of Industrial and Labor Relations provides training services and management support for the DBTAC in Region II.

Mid-Atlantic Disability and Business Technical Assistance Center - Region III

TransCen, Inc.
451 Hungerford Drive, Suite 607
Rockville, MD 20850
adainfo@transcen.org
http://www.adainfo.org

Principal Investigator: Marian S. Vessels, Project Director
Public Contact: 800/949-4232 (V/TTY, in DC, DE, MD, PA, VA, and WV); 301/217-0124 (V/TTY); Fax: 301/217-0754

Project Number: H133D60006
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $575,000; FY 97 $578,000; FY 98 $578,000; FY 99 $600,000
Abstract: The Mid-Atlantic DBTAC provides technical assistance, training, and information dissemination for Delaware, the District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia. It focuses on two major initiatives to implement the ADA effectively: (1) increasing the capacity of state and local organizations to implement the ADA by developing six ADA coalitions, made up of employers, people with disabilities, nonprofit organizations, state and local governments, independent living centers, and other covered entities to provide technical assistance, coordinate training, disseminate information, and promote awareness of the ADA on the local level; and (2) providing a wide range of technical assistance services, training, information, and information dissemination to individuals and entities with responsibilities and rights under the ADA.

Southeast Disability and Business Technical Assistance Center - Region IV

United Cerebral Palsy Associations
490 Tenth Street, First Floor
Atlanta, GA 30318
se-dbtac@mindspring.com
http://www.sedbtac.org

Principal Investigator: Shelley Kaplan, 404/385-0636
Public Contact: 800/949-4232 (V/TTY, in AL, FL, GA, KY, MS, NC, SC, and TN); 404/385-0636 (V/TTY); Fax: 404/385-0641

Project Number: H133D60018
Start Date: November 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $650,000; FY 97 $709,031; FY 98 $739,000; FY 99 $722,168
Abstract: The Southeast DBTAC provides technical assistance, training, and information dissemination for Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee. The DBTAC: (1) facilitates timely access to information and technical assistance by establishing a regional and state presence on the Internet, Internet mailing lists, distance education, and a Web page; (2) enhances the capacity of DBTAC state affiliates by continuing to assist in maintaining and updating their libraries of ADA-related resource materials, and by establishing an instate mentoring program for co-training and assistance in developing ADA awareness within locales; (3) facilitates state linkages among groups protected by the ADA and entities with responsibilities under the ADA, resulting in effective ADA implementation over the long term; and (4) expands outreach to people with and without disabilities who are from minority backgrounds. An information initiative in all eight states is targeted to minority-owned businesses as well as to community organizations, networks, and media serving various ethnic populations.

Great Lakes Disability and Business Technical Assistance Center - Region V

University of Illinois/Chicago
Department of Disability and Human Development
1640 West Roosevelt Road
Chicago, IL 60608-6904
gldbtac@uic.edu
http://www.gldbtac.org

Principal Investigator: David L. Braddock, PhD, 312/413-1647
Public Contact: Robin Jones, Project Director, 800/949-4232 (V/TTY, in IL, IN, MI, MN, OH, and WI); 312/413-1407 (V/TTY); Fax: 312/413-1856

Project Number: H133D60011
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $700,000; FY 97 $738,018; FY 98 $778,000; FY 99 $730,000
Abstract: The Great Lakes DBTAC provides technical assistance, training, and information dissemination for Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. ADA Committees in each state represent business, government, the disability rights community, and other interested parties. Members of these committees serve as a referral network that can be called upon to address local issues. The state ADA Committees conduct training conferences, provide technical support, and address ADA needs that are unique to each state. GLDBTAC disseminates updated information regarding implementation of the ADA to interested parties throughout the region via its quarterly newsletter, *Region V News*, an Internet discussion list, and a learning program.

Southwest Disability and Business Technical Assistance Center - Region VI

The Institute for Rehabilitation and Research (TIRR)
Independent Living Research Utilization (ILRU)
2323 South Shepherd Boulevard, Suite 1000
Houston, TX 77019
lfrieden@ilru.org
http://www.ilru.org/dbtac

Principal Investigator: Lex Frieden
Public Contact: Wendy Wilkinson, Project Director, 800/949-4232 (V/TTY, in AR, LA, NM, OK, and TX); 713/520-0232 (V); 713/520-5136 (TTY); Fax: 713/520-5785

Project Number: H133D60012
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $550,000; FY 97 $550,000; FY 98 $600,000; FY 99 $583,683
Abstract: The Southwest DBTAC provides technical assistance, training, and information dissemination for Arkansas, Louisiana, New Mexico, Oklahoma, and Texas. The DBTAC is based at Independent Living Research Utilization (ILRU), a program of The Institute for Rehabilitation and Research (TIRR) in Houston Texas. The DBTAC carries out its activities with the assistance of a number of affiliated organizations in all the states it serves. Ongoing activities of the DBTAC include ADA outreach to Hispanic individuals. DBTAC affiliates include Centers for Independent Living in each state, the Consumer Education Foundation of the Better Business Bureau in Austin Texas, the Center for Health Policy and Law at the University of Houston, and the Regional Rehabilitation Continuing Education Program (RRCEP).

Great Plains Disability and Business Technical Assistance Center - Region VII

University of Missouri/Columbia
100 Corporate Lake Drive
Columbia, MO 65203
hamburgl@missouri.edu
http://www.adaproject.org

Principal Investigator: David Roberts, Project Director; Jim de Jong, Project Co-Director, 573/882-3600 (V)
Public Contact: 800/949-4232 (V/TTY, in IA, KS, MO, and NE); 573/882-3600 (V/TTY); Fax: 573/884-4925

Project Number: H133D60004
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $500,000; FY 97 $535,000; FY 98 $535,000; FY 99 $500,000
Abstract: The Great Plains DBTAC provides technical assistance, training, and information dissemination for Iowa, Kansas, Missouri, and Nebraska. GPDBTAC has established working relationships with state and local agencies throughout the four-state region that with service delivery. Services are tailored to the needs of the consumer. Timely, periodic mailings, by Internet and regular mail, are sent to professionals, businesses, agencies, local government personnel, persons with disabilities, and other interested parties announcing new developments and resources related to the ADA.

Rocky Mountain Disability and Business Technical Assistance Center - Region VIII

Meeting the Challenge, Inc.
3630 Sinton Road, Suite 103
Colorado Springs, CO 80907-5072
endrphn@mtc-inc.com
http://www.ada-infonet.org

Principal Investigator: Joyce Maynard Hume, Project Director
Public Contact: 800/949-4232 (V/TTY, in CO, MT, ND, SD, UT, and WY); 719/444-0268 (V/TTY); Fax: 719/444-0269

Project Number: H133D60010
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $512,997; FY 97 $616,754; FY 98 $646,754; FY 99 $693,520
Abstract: The Rocky Mountain DBTAC provides technical assistance, training, and information dissemination for Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming. The project includes a centralized InfoCenter that serves as a clearinghouse, a network of experts qualified to provide assistance, and linkages with groups who have rights and responsibilities under the ADA. Information is disseminated through databases, direct mail, a newsletter, the general media, and the telephone.

Pacific Disability and Business Technical Assistance Center - Region IX

Public Health Institute
2168 Shattuck Avenue, Suite 301
Berkeley, CA 94704-1307
adatech@pdbtac.com
http://www.pacdbtac.org

Principal Investigator: Erica C. Jones, Project Director, 510/848-2980 (V); 510/848-1840 (TTY)
Public Contact: 800/949-4232 (V/TTY, in AZ, CA, HI, NV, and the Pacific Basin); Fax: 510/848-1981

Project Number: H133D60016
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 96 $650,000; FY 97 $753,682; FY 98 $737,789; FY 99 $720,000
Abstract: The Pacific DBTAC provides technical assistance, training, and information dissemination for Arizona, California, Hawaii, Nevada, and the Pacific Basin. The DBTAC coordinates and conducts regional conferences, individual state and local training sessions, and workshops about the provisions of the ADA. The Center also works to increase the level of local entities' capacities to provide expertise to ensure that implementation of the ADA occurs. The Pacific DBTAC engages in minority outreach and training, and uses electronic distance learning techniques to reach underserved geographic locations. The current network of affiliates is being expanded to enhance local capacity through a home page on the World Wide Web and by creating partnerships with business, state and local government agencies, and people with disabilities. By increasing awareness in the region through a comprehensive marketing and communications plan, the project is fulfilling the NIDRR DBTAC priorities.

Northwest Disability and Business Technical Assistance Center - Region X

Washington State Governor's Committee on Disability Issues and Employment
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http://www.wata.org/NWD

Principal Investigator: Toby Olson, Project Director
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Project Number: H133D60009
Start Date: October 1, 1996
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 96 $512,500; FY 97 $484,322; FY 98 $533,345; FY 99 $533,345
Abstract: The Northwest DBTAC provides technical assistance, training, and information dissemination for Alaska, Idaho, Oregon, and Washington. A subcontract has been established with a consumer-controlled, community-based organization in each of the states in Region X. The activities of the project are directed toward augmenting community capacities, and the existing organizational structures found within those communities are the avenues through which the project does much of its work. The project maintains a central clearinghouse and a toll-free number for information, technical assistance, and referral to national, regional, state, and local resources. The clearinghouse provides callers with an appropriate range of options and links them with individuals in their community who have gained expertise in the caller's area of concern.

National ADA Program Assistance Coordinator

CESSI
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Principal Investigator: Shelia Newman
Public Contact: Lyn Sowdon, Project Director, 703/448-6155 (V); 703/448-3079 (TTY); Fax: 703/442-9015

Project Number: ED-99-CO-0002
Start Date: November 6, 1998
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $319,744
Abstract: The role of the ADA Program Assistance Coordinator (PAC) is to enhance the performance of the organizations that are members of NIDRR's nationwide ADA Technical Assistance grant program. These include ten regional Disability and Business Technical Assistance Centers (DBTACs), and Cornell University School of Industrial and Labor Relations' Research and Demonstration Project (R&D) for improving employment practices covered by Title I of the ADA. The Program Assistance Coordinator conducts: (1) coordination services; (2) collaborative assistance; (3) public relations; and (4) reporting activities. In addition, the PAC organizes and manages the semi-annual Project Directors' meetings. It facilitates legal review of grantee generated materials. The PAC identifies and distributes appropriate materials from Federal agencies, related NIDRR research projects, and private and public sector organizations. As a gateway to the national ADA technical assistance grant program, the PAC maintains a national Web site, develops and disseminates promotional materials, and implements a national visibility campaign for the grantees.

Capacity-Building for Rehabilitation Research and Training

NIDRR funding for capacity building supports efforts to improve the rigor of rehabilitation research and its relevance to the consumer community. This research training will emphasize cross-disciplinary efforts and participatory research that take into account trends in science and society. This training must contextualize disability and rehabilitation in society. Capacity building targets all participants in the disability research field, including scientists, service providers, and consumers. For scientists, emphasis is placed on training to increase the number of researchers with knowledge of advanced research methods. For providers, training will focus on applying to practice new knowledge generated by research efforts. For consumers, the goal is training to facilitate the use of research findings as well as participation in research activities. Other goals of NIDRR's capacity building efforts include increasing the number of rehabilitation researchers with disabilities and from underserved populations.

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Center for Minority Training and Capacity Building for Disabilities Research

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Project Number: H133A990024
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 99 $429,994
Abstract: This project addresses the education, training, and preparation of minority researchers in disability research, in collaboration with other minority, majority, and tribal institutions. The project includes a multifaceted approach to the assessment of current barriers experienced by minority researchers, including those with disabilities and those funded by NIDRR. Project activities include institutional capacity building for minority institutions to conduct disability research; training minority and majority researchers; and dissemination of information, communications, and publications to enhance the capacity of researchers to compete for future research funds.

Outcomes of Early Assistive Mobility

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Project Number: H133F990056
Start Date: September 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $55,000

Abstract: This study examines the functional outcomes of providing mobility aids to young children with severe to most severe disabilities. The objectives are: (1) to adapt testing techniques (used in prior research) that demonstrate the powerful effects of crawling on infant development for use with young children with severe motor disabilities; (2) to examine the test-retest reliability of these measures; (3) to examine whether performance on these measures changes with the onset of assistive mobility; and (4) to compare the children's performance on these measures with the distance traveled and navigational skill in their device and performance on three standardized instruments that are currently used in clinical settings.

The State of the States in Disability: Creating a Longitudinal Nationwide Data Base on Services, Costs, and Funding Levels

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Principal Investigator: David L. Braddock, PhD, 630/655-4396
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Project Number: H133F990035
Start Date: September 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $55,000

Abstract: This project lays the groundwork for extending and expanding current research on the "State of the States In Developmental Disabilities" to other disabilities, including mental illness, physical disability and sensory disability. This leads to the creation of longitudinal state-by-state data sets on the structure and financing of programs, services, and supports being provided in each state to people with physical and mental disabilities. Such a database permits service and support levels for disability programs to be monitored over time in each state, and allows meaningful comparisons to be made across the states. These comparisons permit the leaders and the laggards among the states to be empirically identified so advocates can organize their efforts more effectively and stimulate the adoption of innovation in disability services across the country.

Comparative Study of Disability Nondiscrimination Law and Alternative Means of Implementation and Enforcement

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Project Number: H133F990006
Start Date: August 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $55,000

Abstract: This study examines implementation and enforcement strategies that heighten compliance with disability nondiscrimination. It suggests that the development of national disability policy in the U.S. can be enriched by a fuller understanding of comparable laws and advocacy approaches applied in other industrialized countries. The primary goal of the project is to identify and analyze some of the alternative mechanisms under national laws to resolve complaints of discrimination in employment, public accommodation, and local government services, including negotiation, mediation, self-evaluation plans, administrative adjudication, litigation, and the roles of national commissions and ombudsmen. Studying several nonadversarial means for applying egalitarian principles benefits the United States and its disability research community by revealing alternative ways to prevent discrimination and promote equality. To a secondary extent, the research considers related innovations that strengthen alternative dispute resolution mechanisms and supports for independent living in other countries, such as the Swedish National Disability Ombudsman, the Swedish law on Support Services for Persons with Certain Functional Impairments (1994), and the proposed British Disability Discrimination Commission. This project provides a significant opportunity to assess the influence that the ADA has had on the development of comparable nondiscrimination provisions in other countries.

Impact of Training and Support Strategies on Employment Outcomes for Persons with Disabilities from Minority Backgrounds

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Project Number: H133F990055
Start Date: July 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $55,000

Abstract: This study determines the impact of training and support strategies on the employment outcomes of participants with disabilities from minority and low income backgrounds, with a focus on those with severe disabilities. In the past six years, Nassau BOCES has added several innovative training and support strategies to its Projects with Industry (PWI) model to meet the needs of people with severe disabilities and those from minority backgrounds. These include: the Intensive Support Program (ISP), vocational training in eight occupations for those with severe disabilities, and Work Opportunities for Women (WOW), a federally funded model demonstration project for women with severe disabilities from minority backgrounds. Testing the effectiveness of these strategies is the focus of this research study.

Examination of Risk Factors for the Maltreatment of Deaf Children

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Project Number: H133F990012
Start Date: September 30, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $45,000

Abstract: This research examines family communication and educational placement factors that influence risk for the maltreatment of children who are deaf. A recent study found that children with disabilities are 1.7 times more likely to be maltreated when compared to children without disabilities. This study conducts a quantitative examination of risk factors for the abuse of children who are deaf, including communication method and competence within families, residential school attendance, in addition to child welfare system language accommodation. Research includes a survey, using a cross sectional design of 2,000 adult deaf individuals randomly selected from the National Directory of TTY Numbers, including retrospective information regarding a history of childhood maltreatment by using the Conflict Tactics Scale-2 and Conflict Tactics Scale Parent-Child. Respondent demographic information includes degrees of deafness, age of onset, family communication type and competency measures, and type of educational placement (residential school for the deaf or mainstream). Findings from this study provide empirically-based evidence to help inform policies to improve the safety of educational placements and services for parents of newly diagnosed deaf children.

Utilization of Medical and Rehabilitation Services by Hispanic Children with Disabilities

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Project Number: H133F990027
Start Date: July 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $45,000

Abstract: This research identifies whether or not differences exist in the expectations of medical and rehabilitation services, concerns, and unmet needs between Hispanic and non-Hispanic caregivers of children with disabilities. Are differences reflected in the utilization patterns of these services by children enrolled in the State of Connecticut Children with Special Health Care Needs and Husky Plus Programs? Caregiver responses to a needs assessment questionnaire designed for use with both Hispanic and non-Hispanic families and utilization patterns are analyzed in the context of important sociocultural, economic, and medical factors. This provides information on how caregiver perceptions of health services and unmet needs vary with sociocultural and economic factors. The aim of this research is to provide information to medical and rehabilitation professionals to improve service delivery and evaluation for Hispanic children with disabilities. The results of the research provide a needs assessment questionnaire useful for both Hispanic and non-Hispanic families and facilitate the generation of additional hypotheses concerning the contribution of sociocultural factors to disability status in children.

Haptic Soundscapes: Developing Novel Access to Maps, Tables, and Graphs for Vision Impaired People

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Project Number: H133F990003
Start Date: September 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $45,000
Abstract: The aim of this fellowship is to research, develop, evaluate, and disseminate haptic soundscapes, a tool that allows people with little or no vision to interact with maps, diagrams, and graphs displayed via dissemination media, such as the Internet, through sound, touch, and force feedback. Haptic soundscapes follows on from the work of NOMAD, a touch pad that is used to add speech to hard copy tactile maps. This is the first step in developing a digital audio-tactile map system that is navigable over the Internet or on an individual computer. Although of principal utility for people with severe visual impairments, this interface allows normative educational resources for children and people with learning difficulties to be developed and accessed through the Internet.

Sources and Levels of Personal Assistance for Adults with Disabilities

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Project Number: H133F990001
Start Date: July 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $55,000

Abstract: The project uses data from Phases 1 and 2 of the Disability Supplement to the 1994 and 1995 National Health Interview Surveys to develop nationally representative profiles of the types of personal assistance received by adults with disabilities, and to identify the factors that contribute to variation in the type and amount of assistance received (e.g., age, gender, race, marital status, family income, insurance coverage, employment status, type and severity of disability). Data from these analyses and related research are used to estimate the size and composition of the noninstitutionalized adult population potentially eligible for federal benefits, and to determine the current support arrangements and assistance levels of eligible groups. Additional activities during the fellowship period include preparation of a new graduate course in comparative disability policy, and a review of theoretical and empirical work on the links between disability and social class.

Fellowships (Merit)
Ohio

Biomechanical Analysis of Tendon Transfer Surgeries

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Project Number: H133F990020
Start Date: September 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $45,000
Abstract: The specific aim of this research project is to improve the functional outcome of the brachioradialis to extensor carpi radialis brevis (BR-ECRB) tendon transfer, an orthopaedic surgical procedure performed to restore voluntary wrist extension in individuals with a spinal cord injury at the fifth cervical segment. The hypothesis of this project is that the elbow flexion movement arm of the brachioradialis (the largest movement arm of all of the elbow flexors) interferes with the restoration of wrist function after BR-ECRB transfer. That is, the biomechanics of the transfer (its force- and movement-generating properties as determined from muscle architecture and movement arm) limit post-operative wrist function. This project integrates state-of-the-art biomechanical modeling with experimental quantification of muscle function to specify factors that influence wrist function after the BR-ECRB transfer and to suggest methods to improve surgical outcomes.

Fellowships (Merit)
Ohio

Improving Parent Involvement Associated with School to Work Transition for Youth with Disabilities

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Project Number: H133F990052
Start Date: September 1, 1999
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $45,000

Abstract: This study assesses the effects of an information and support program, What's Next, on the attitudes and stress levels of parents whose children with disabilities are transitioning from school to work. Participants are parents of youth with substantial disabilities between the ages of 16 and 24 who are on a waiting list for supported living services through a County Board of Mental Retardation and Developmental Disabilities. The purpose of this study is to determine the extent to which support and information improves parent attitudes toward transition and reduces parent stress. Parent involvement has been identified as the single most important factor in successful transition for youth with disabilities. Increased parent understanding of and participation in the transition process ultimately leads to more successful work outcomes and improved social/emotional adjustment for youth with disabilities.

Advanced Rehabilitation Research Training Project in Rehabilitation Services Research

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Project Number: H133P80014
Start Date: May 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $150,000; FY 99 $150,000
Abstract: This project develops a five-year fellowship program in rehabilitation service research at Northwestern University's Department of Physical Medicine and Rehabilitation. It uses available expertise and collaborators to train postdoctoral fellows in rehabilitation health services research. Over two years the program includes course work, a practicum, original research, and grant writing. Fellows new to health services research have six core courses, as well as the four-to-five additional courses for all fellows. The first year concentrates on beginning Masters in Public Health (MPH) courses. The second year includes intermediary MPH course work plus electives. Each fellow is expected to develop an individual research project by the end of the first training year and a publishable article by the end of the second year in addition to submitting at least one grant application related to the research activity.

Rehabilitation Science for Engineers and Basic Scientists: An Advanced Training Program

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Project Number: H133P990006
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $148,323

Abstract: The goal of this program is to increase the number of PhD engineers and basic scientists trained to perform research aimed at solving problems of people with disabilities. To meet this objective, the project trains postdoctoral scientists in three areas of special expertise: musculoskeletal biomechanics; neurorehabilitation; and prosthetics, orthotics, and biomaterials. Targeted technical training is coordinated with intensive clinical instruction and experience. Postdoctoral trainees, including scientists and engineers from minority or disability groups, are recruited by regional and national advertising and via the Internet. Many training faculty are based within the Rehabilitation Institute of Chicago, providing access to active clinical rehabilitation programs, and interaction both with clinical faculty and people with disabilities.

Rehabilitation Research Training Program

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Principal Investigator: Ann Turnbull, PhD
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Project Number: H133P70004
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $150,000; FY 98 $150,000; FY 99 $150,000
Abstract: This project increases the quantity of new post-doctoral and doctoral researchers and ensures their competency along family-systems, life-span, and multicultural dimensions. Focusing on families whose members have disabilities, the scholars become capable of conducting independent research related to: (1) the families studied; (2) rehabilitation and special education agencies, systems, and processes; and (3) families and individuals from culturally and linguistically diverse backgrounds who are served by those systems. The post-doctoral fellows collaborate with faculty from the Beach Center, Special Education Department, and other faculty in learning and conducting disability and family research for a full year. The doctoral trainees take their PhD degrees in special education, majoring in family and disability studies and minoring in research methodologies.

The Development, Implementation, and Evaluation of a Research Training Program in Psychiatric Rehabilitation

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Principal Investigator: Sally E. Rogers
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Project Number: H133P70014
Start Date: March 1, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $147,489; FY 98 $147,489; FY 99 $147,489

Abstract: In this program, six individuals who possess doctoral-level clinical training are recruited and provided with a broad-based, intensive 27-month training fellowship in rehabilitation research. To provide an optimal training experience, three fellows are in residence at a time. Each fellow gains competency in the following areas: psychiatric rehabilitation, research design/methodology, statistics, consumer issues (as they relate to applied research), the conduct of applied rehabilitation research, computer literacy, and grant and professional writing.

An Integrated Rehabilitation Engineering Research Training Program

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Project Number: H133P990003
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $149,915

Abstract: The goal of this project is to establish a clinically-oriented, scientifically grounded educational program for training biomedical engineering (BME) postdoctoral fellows in rehabilitation engineering. The overall objective of the program is to produce biomedical engineers who are capable of communicating and interacting with physician investigators in a significant and meaningful manner, and who are capable of defining and solving clinically relevant problems in rehabilitation engineering. The specific objectives of this project are: (1) to establish a core faculty and administrative structure for the training program; (2) to provide BME postdoctoral fellows with the opportunity to participate in clinical educational rotations in physical medicine and rehabilitation (PM&R) and geriatrics; (3) to provide BME postdoctoral fellows and medical trainees in geriatrics or PM&R with the opportunity to collaborate on clinically relevant research projects; and (4) to establish a rehabilitation engineering curriculum that includes didactic sessions on clinical research methodology, as well as a seminar series to expose trainees to leaders in the field and develop their own expertise in giving scientific presentations. Accordingly, this program trains a new cadre of biomedical engineers with the knowledge and skills to develop innovative rehabilitation technologies that directly benefit individuals with disabilities.

Rehabilitation Health Services Research Fellowship Program

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Project Number: H133P990004
Start Date: June 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,999

Abstract: This program provides health services research training experience for doctoral-level professionals from the rehabilitation disciplines. The primary goal is to qualify these fellows to conduct independent, high quality, funded health services research on problems related to disability and rehabilitation. Specific goals of the program include: (1) providing intensive, broad-based health services research training consisting of didactic coursework offered by faculty of Boston University to a total of six post-doctoral fellows over the course of the 5-year project; (2) providing each fellow with the opportunity to conduct rehabilitation health services research under the guidance of a faculty mentor from Boston University; and (3) critically evaluating this rehabilitation health services research training program, including the recruitment, academic preparation, mentoring, and the career development of participating fellows. Through state-of-the-art training and mentoring, project contributes to the creation of a cadre of highly skilled health services researchers equipped to conduct research that improves the measurement of rehabilitation outcomes, evaluate new and existing rehabilitation inventions, and broadly apply health services research methods to the improved organization and management of rehabilitation services in this changing health care environment.

The UMHS/MSU/AACIL Rehabilitation Research Training Program

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Project Number: H133P990014
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,955
Abstract: Through this research training experience, fellows and resident trainees acquire and enhance research skills, learn to collaborate effectively across important rehabilitation areas and disciplines, learn to demonstrate a capacity to apply the results of research to the formulation of disability policy, and develop skills that result in successful research proposals, thereby insuring continuance of outstanding rehabilitation research. Emphasizing the consumer-scientist-practitioner model, this multidisciplinary research training program utilizes faculty and resources from both the University of Michigan and Michigan State University, and the AACIL to train six post-doctoral level professionals and ten Physical Medicine and Rehabilitation (PM&R) resident physicians in advanced rehabilitation research. A variety of didactic and practical experiences make up this research training program. These include participation in academic courses available at two university campuses, research seminars, presentations and lectures at meetings and national conferences, and an opportunity to work collaboratively on research projects being conducted at the three sites. Fellows and resident trainees select from a curriculum that focuses on four content areas: (1) vocational rehabilitation and assistive technology; (2) health/medical rehabilitation outcomes; (3) independent living and community integration; and (4) socioeconomic aspects of rehabilitation.

Research Enrichment Program for Physiatrists

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Research Enrichment Program
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Principal Investigator: Jerry C. Parker, PhD, 573/814-6480
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Project Number: H133P80009
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 98 $150,000; FY 99 $150,000
Abstract: This project trains 30 physiatry residents and junior faculty in the basic methodological skills and academic values required to conduct independent research projects. Participants in enrichment programs travel periodically to a central location (or locations) to receive intensive enrichment experiences. Participants are carefully mentored through the successive steps required for an independent research project. Through the use of carefully designed teaching modules and individualized instruction, ten participants per year are guided through the steps of an independent research project, including understanding research design, developing skills for statistical collaboration, preparing research manuscripts, presenting at scientific meetings, understanding peer review procedures, and applying for extramural funds. Scholarships are used to cover travel expenses for participants, and research accounts are used to defray the expenses associated with data collection. Over the course of one year, participants travel to six centralized training locations. Participants are required to plan and implement a thesis-like project in their home institutions and to present their research findings.

Advanced Multidisciplinary Training Program in Rehabilitation Outcomes Research

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Principal Investigator: Mark Johnston, PhD, 973/243-6810
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Project Number: H133P70011
Start Date: March 1, 1997
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 97 $149,608; FY 98 $149,000; FY 99 $149,000
Abstract: Outcomes research designates a group of interrelated scientific methodologies and domains of knowledge that address issues of the effectiveness and cost-effectiveness of rehabilitation in practice. This project redesigns the research training program to address the scientific basis of patient outcomes and the effectiveness of rehabilitation in practice. Three areas of research and training, each with several specific training tracks under experienced research mentors, include: (1) general outcomes and rehabilitation services research, including functional assessment, practice guidelines, disability economics, health policy, and disability sociology; (2) studies of community intervention programs, including outpatient clinics, primary care, independent living programs, geriatric rehabilitation, and alternative medicine; and (3) medical and neuropsychological outcomes research, involving study of specific pathologies or interventions and their relationships to functional outcomes. The program provides advanced research training to three or more PhD or MD fellows each year, usually for a 2-year term; a predoctoral student at the dissertation level may also be supported. The program is multidisciplinary, including all of the major disciplines associated with rehabilitation and with outcomes research.

Research Training in Rehabilitation Science with Special Emphasis on Disability Studies

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Project Number: H133P70013
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 97 $141,327; FY 98 $147,327; FY 99 $147,327
Abstract: This program provides a plan for research training in the emerging academic discipline of rehabilitation science. The program is based on a multidisciplinary approach to the study of topics and issues of relevance to people with disabilities. A primary goal is to develop an increased capacity for research in the general domain of rehabilitation science, and particularly in the area of disability studies; very important to increasing capacity is increasing the recruitment, admission, and training of people with disabilities. The program of study is based on a challenging curriculum of didactic instruction, clinical exposures, community interaction, and research experiences, and encompasses study and research over a spectrum of scientific, technical, psychosocial, physical, physiological, cultural, ethical, political, economic, and clinical issues.

Interdisciplinary Rehabilitation Research Training Program

University of Texas Medical Branch
301 University Boulevard
Galveston, TX 77555
kottenba@utmb.edu
http://www.sahs.utmb.edu/rehab

Principal Investigator: Kenneth J. Ottenbacher, PhD
Public Contact: 409/772-3002; Fax: 409/747-1623

Project Number: H133P990001
Start Date: July 1, 1999
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 99 $129,562
Abstract: This project provides postdoctoral research opportunities to qualified individuals interested in clinical and academic careers related to rehabilitation research. Three postdoctoral fellows plan, conduct, and disseminate research in one of the following areas: Cognitive/Neurological Rehabilitation, Applied Biomechanics/Physiology of Rehabilitation, and Geriatric Rehabilitation. Each rehabilitation research fellow selects one of the three research areas and conducts clinical investigations for up to three years. Outcomes include published research studies, presentations at national scientific meetings, submission of grant proposals, completion of research- related courses, training in techniques of dissemination, and the development of interdisciplinary research networks. In addition to participating in clinical research activities, each fellow completes a series of core courses and directed study related to interdisciplinary research and the ethics associated with scientific inquiry in rehabilitation. The activities of each postdoctoral fellow are directed and monitored by a fellowship supervisor with a demonstrated ability to implement, conduct, and disseminate the results of research investigations important to the advancement of rehabilitation science.

Research Training and Career Development Program

Virginia Commonwealth University
Physical Medicine and Rehabilitation
Box 980542
Richmond, VA 23298-0542
jskreutz@hsc.vcu.edu
http://www.neuro.pmr.vcu.edu

Principal Investigator: Jeffrey S. Kreutzer, PhD
Public Contact: Jennifer Marwitz, 804/828-3704; Fax: 804/828-2378

Project Number: H133P70003
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $142,430; FY 98 $149,971; FY 99 $149,971

Abstract: This project increases the number of highly skilled rehabilitation research professionals through an advanced research training program. The research training program is built upon an existing network of research, clinical care, and teaching resources: on-campus resources include the nation's third largest teaching hospital, an NIH Head Injury Center, a Rehabilitation Research and Training Center, and NIDRR traumatic brain injury and spinal cord injury model systems of care. Program philosophy emphasizes interdisciplinary collaboration, creativity, quality, and diligence, and emphasizes applied research; it provides training to individuals with advanced degrees who are committed to a career in rehabilitation. A distinguished interdisciplinary faculty represents fields within basic sciences, biostatistics and methodology, medicine, psychology, computing and telecommunications, allied health fields, and vocational rehabilitation.

Technical Support for Computer and Other Related Activities

Conwal, Inc.
6858 Old Dominion Road
McLean, VA 22101
headquarters@conwal.com
http://www.conwal.com

Principal Investigator: Shelia Newman
Public Contact: 703/448-2300 (V); 703/448-3079 (TTY); Fax: 703/448-3087

Project Number: ED-98-CO-0004
Start Date: January 9, 1998
Length: 60 months
NIDRR Officer: Joseph DePhillips
NIDRR Funding: FY 98 $500,000; FY 99 $962,042
Abstract: This project provides technical support to NIDRR for computer-based and other related activities. Activities include data collection and tabulation, database and management information system development, statistical analyses, literature reviews, small surveys, and focus group meetings. Active projects involve analysis and design of a management information system for NIDRR, focus groups for planning the research agenda, and electronic dissemination.

State Technology Assistance

This program, funded under Title I of the The Assistive Technology Act of 1998, supports consumer-driven Grants to States. Currently there are 56 projects that provide statewide, comprehensive, technology-related assistance for individuals with disabilities of all ages. The purpose of the program is to increase and improve access to assistive technology devices and services through public awareness and information, advocacy, outreach, technical assistance and training and interagency coordination.

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Assistive Technology Act Data Collection Project

InfoUse
2560 Ninth Street, Suite 216
Berkeley, CA 94710-2557
shanson@infouse.com

Principal Investigator: Stuart Hanson
Public Contact: 510/549-6520; Fax: 510/549-6512

Project Number: H224B990001
Start Date: September 30, 1999
Length: 48 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 99 $338,000
Abstract: The Assistive Technology (AT) Act Data Collection Project provides a Web-based performance standards reporting system that conforms to NIDRR policy and the requirements of the Government Performance and Results Act (GPRA) of 1993. The performance standards are developed through a broadly inclusive process involving the AT Act State Program grantees and other key stakeholders and users of information regarding the outcomes of the AT Act State Program. InfoUse also provides state estimates of the need for and use of AT, as well as other useful information on the availability, use, and reliability of AT devices and services, especially among underserved populations. In addition, the project provides descriptive and evaluative information on model approaches clustered around key program and service delivery areas. In conducting this project, InfoUse works closely with the 56 state and territorial AT Act grantees, the Technical Assistance Projects to the AT Act State Program and P&A Program grantees, the National AT Internet Site project, as well as consumers, service providers, advocates, and experts in the field.

National Assistive Technology (AT) Advocacy Project

Neighborhood Legal Services, Inc.
Disability Law Unit
295 Main Street, Room 495
Buffalo, NY 14203-2473
atproject@nls.org
http://www.nls.org

Principal Investigator: James R. Sheldon Jr., Esq.
Public Contact: 716/847-0650; Fax: 716/847-0227

Project Number: H224B990002
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $199,774

Abstract: This project serves a primary customer base of attorneys and advocates who work for the 56 Protection and Advocacy for Assistive Technology (PAAT) projects. It provides: (1) advocacy-related technical assistance (TA) to attorneys and advocates to assist them in their advocacy-related activities. TA is provided by telephone, fax, email, and mail; (2) management-related TA to protection and advocacy (P&A) managers and fiscal officers to assist them in their management and fiscal responsibilities associated with their PAAT grants as funded through NIDRR; (3) advocacy-related training through an annual, three-day Project Conference, sessions at the annual National Association of Protection and Advocacy Systems (NAPAS) conference, and distance training on special education, Medicare, and other topics to be determined; (4) management-related training through its subcontractor, NAPAS, at four annual training events sponsored by NAPAS; (5) publications on the funding of AT through a variety of funding sources, including newsletters, feature articles, booklets, and training handouts; (6) a clearinghouse for documents related to the funding of AT through in-house Resource Libraries containing administrative hearing decisions and a wide range of court-related documents, including briefs and complaints; and (7) a Web site containing information relating to the funding of AT, including many of the Project's publications, and links to other Web-based resources to support AT advocacy efforts.

Technical Assistance for Assistive Technology Act State Grant Program Grantees

Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)
1700 North Moore Street, Suite 1540
Arlington, VA 22209-1903
resnata@resna.org
http://www.resna.org/hometa1.htm

Principal Investigator: James R. Galetka
Public Contact: M. Nell Bailey, 703/524-6686, ext. 305 (V); 703/524-6639 (TTY); Fax: 703/524-6630

Project Number: H224B990005
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 99 $637,999
Abstract: The technical assistance (TA) project supports the 56 State Assistive Technology Act Grantees. The purpose is to assist the State Grantees reduce barriers and increase access to assistive technology (AT) devices and services for consumers with disabilities of all ages through advocacy and capacity-building initiatives. The TA project provides timely, responsive, and proactive assistance using a comprehensive model for delivery. Delivery strategies include onsite visits and training by expert consultants; national meetings focused on national policy issues; "tool kits" filled with ideas, strategies, sample documents, and other information; on-line services and communication tools; and others. All are responsive to state grantees' needs to build capacity in changing systems in their state in order to increase access to AT for individuals with disabilities.

Alabama Statewide Technology Access and Response Project (STAR) System for Alabamians with Disabilities

Alabama Department of Rehabilitation Services
2125 East South Boulevard
P.O. Box 20752
Montgomery, AL 36120-0752
tbridges@rehab.state.al.us
http://www.rehab.state.al.us/star

Principal Investigator: Steve Shivers
Public Contact: Ted Bridges, 800/782-7656 (V, in state only); 334/613-3480 (V); 334/613-3519 (TTY); Fax: 334/613-3485

Project Number: H224A30009
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $520,670; FY 94 $540,000; FY 95 $580,000; FY 96 $536,900; FY 97 $574,900; FY 98 $710,052; FY 99 $730,000
Abstract: This project addresses nine goals: (1) to establish an organizational structure that maximizes consumer participation; (2) to facilitate interagency collaboration in the development of policies and procedures concerning technology services; (3) to maximize consumer participation at all levels of project activities; (4) to establish a statewide consumer and family network; (5) to develop a statewide consumer-responsive information and referral system; (6) to develop a public awareness campaign to elevate the understanding of the benefits and use of technology for people with disabilities; (7) to develop and provide technology training activities for consumers, their families, professionals, employers, and the general public regarding technology-related issues; (8) to advance positive policy and funding changes that improve the procurement of and access to technology devices and services; and (9) to develop and implement a project evaluation system and conduct ongoing needs assessment.

Assistive Technologies of Alaska

Alaska Department of Labor and Workforce Development
Division of Vocational Rehabilitation
1016 West Sixth, Suite 205
Anchorage, AK 99501
james_beck@labor.state.ak.us
http://www.labor.state.ak.us/ata/index.htm

Principal Investigator: Jim Beck
Public Contact: 800/478-4378 (V/TTY, in state only); 907/269-3569 (V/TTY); Fax: 907/269-3632

Project Number: H224A00002
Start Date: July 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $563,052; FY 91 $565,205; FY 92 $595,000; FY 93 $748,000; FY 94 $749,298; FY 95 $749,298; FY 96 $693,618; FY 97 $731,618; FY 98 $548,714; FY 99 $368,000
Abstract: Assistive Technologies of Alaska (ATA) is a systems change project funded under the authority of the Tech Act. ATA has worked to establish a statewide, consumer-responsive system to improve access to assistive technology. The project has responded to the needs of Alaskans with disabilities by creating training tools and resource documents; establishing a guaranteed loan program; achieving passage of an assistive technology consumer protection law; and setting up a statewide library system for access to technology. In the last two years, the project is transitioning services to other permanent programs.

American Samoa Assistive Technology Service (ASATS) Project

Division of Vocational Rehabilitation
Department of Human Resources
Pago Pago, American Samoa 96799
EdPerei@yahoo.com

Principal Investigator: Pete P. Galea'i
Public Contact: Edmund Pereira, Program Director, 011/684/699-1529 (V); 011/684/233-7874 (TTY); Fax: 011/684/699-1376

Project Number: H224A30014
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $139,200; FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $210,000; FY 99 $105,000
Abstract: This project addresses four goals: (1) identification, training, and support of people with disabilities to provide direction and guidance to the American Samoa Assistive Technology Project; (2) development and implementation of a system for individual and program needs assessment for assistive technology; (3) development and promotion, in collaboration and in partnership with existing agencies, of a consumer responsive, culturally appropriate assistive technology service-delivery system; and (4) development and implementation of a model multi-agency information, education, and public awareness system.

Arizona Technology Access Program (AzTAP)

Institute for Human Development
Northern Arizona University
2715 North Third Street, Suite 104
Phoenix, AZ 85004
jill.oberstein@nau.edu
http://www.nau.edu/~ihd/aztap

Principal Investigator: Jill Oberstein, Project Director
Public Contact: 800/477-9921 (V); 602/728-9532 (V); 602/728-9536 (TTY); Fax: 602/728-9535

Project Number: H224A40002
Start Date: October 1, 1994
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 $507,916; FY 95 $550,000; FY 96 $509,130; FY 97 $547,130; FY 98 $675,531; FY 99 $654,103

Abstract: This program increases access to assistive technology (AT) services and devices for people with disabilities and their families and facilitates the development of a coordinated, consumer-responsive AT service-delivery system. The program includes seven goals: (1) to establish a program infrastructure that is consumer responsive and promotes system change; (2) to increase consumer involvement; (3) to increase interagency collaboration and coordination; (4) to increase awareness of the needs for, and efficacy of, AT services and devices; (5) to increase the competencies and skills of providers and consumers of AT services and devices; (6) to improve program and fiscal resources; and (7) to develop and implement protection and advocacy services in support of the program. Priority activities include: information and referral, training and technical assistance, outreach to under-represented populations, funding and policy analysis, advocacy, and research.

Arkansas Increasing Capabilities Access Network (ICAN)

Arkansas Rehabilitation Services
Department of Workforce Education
2201 Brookwood Drive, Suite 117
Little Rock, AR 72202
sogaskin@ars.state.ar.us
http://www.arkansas-ican.org

Principal Investigator: Sue Gaskin
Public Contact: 800/828-2799 (V/TTY, in state only); 501/666-8868 (V/TTY); Fax: 501/666-5319

Project Number: H224A90020
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Judith Fein
NIDRR Funding: FY 89 $503,811; FY 90 $506,078; FY 91 $551,078; FY 92 $725,000; FY 93 $773,929; FY 94 $835,000; FY 95 $835,000; FY 96 $772,951; FY 97 $579,713; FY 98 $386,476; FY 99 $386,476

Abstract: This project's activities and objectives include establishing a clearinghouse for technology, expanding funding alternatives for technology, creating a consumer-responsive technology system through legal remedies, expanding outreach programs, increasing system capacity through education across professional and technical disciplines, and providing information and referral services.

California Assistive Technology System (CATS)

California Department of Rehabilitation
Program Community Support Division
2000 Evergreen
P.O. Box 944222
Sacramento, CA 94244-2220
dor_dlaw@yahoo.com
http://www.catsca.org

Principal Investigator: William Campagna, 916/263-8686 (V)
Public Contact: Colin Corby, 916/263-8687 (V/TTY); Fax: 916/263-8683

Project Number: H224A30008
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $550,000; FY 94 $680,000; FY 95 $900,000; FY 96 $833,000; FY 97 $871,121; FY 98 $1,337,103; FY 99 $1,312,675
Abstract: This project carries out its mission through the work of two groups—a State Interagency Committee on Technology-Related Assistance (SICTRA) and the CATS Steering Council (a majority of whose members are consumers). SICTRA oversees programs aimed at reducing interagency impediments to service delivery. The CATS Steering Council oversees the development of programs for information and referral, the development of curricula, presentation of workshops for consumers and community organizations, and examination of mechanisms and methodology to increase both technology funding and the means to reach unserved and underserved populations.

Colorado Assistive Technology Project (CATP)

University of Colorado Health Sciences Center
Colorado University Affiliated Program
The Pavilion, A036 Box B140
1919 Ogden Street, Second Floor
Denver, CO 80218
cathy.bodine@uchsc.edu
http://www.uchsc.edu/catp

Principal Investigator: Cathy Bodine, Project Director
Public Contact: 800/255-3477 (in state only); 303/864-5100 (V); 303/864-5110 (TTY); Fax: 303/864-5119

Project Number: H224A40014
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $540,140; FY 90 $542,571; FY 91 $577,571; FY 92 $609,538; FY 93 $690,407; FY 94 $780,000; FY 95 $780,000; FY 96 $722,000; FY 97 $541,529; FY 98 $361,019; FY 99 $361,019
Abstract: This project's activities and objectives include a network of Technology Outreach Centers throughout the state and a central assistive technology resource center. Project activities include information, referral, public awareness, training, technical assistance, and electronic networking linkages between local agencies and the state. Systems-change activities include a task force on policy review and analysis, ongoing advocacy education, and direct advocacy services through a contract with the state protection and advocacy system.

Connecticut Assistive Technology Project

Connecticut Department of Social Services
Bureau of Rehabilitation Services
25 Sigourney Street, 11th Floor
Hartford, CT 06106
cttap@aol.com
http://www.techact.uconn.edu

Principal Investigator: John M. Ficarro
Public Contact: 800/537-2549 (in state only); 860/424-4881 (V); 860/424-4839 (TTY); Fax: 860/424-4850

Project Number: H224A20013
Start Date: October 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $525,000; FY 93 $554,000; FY 94 $580,000; FY 95 $520,000; FY 96 $500,000; FY 97 $538,000; FY 98 $651,365; FY 99 $629,937
Abstract: This program includes a single point of entry, advocacy, information and referral, peer counseling, and access to objective expert advice and consultation for people with disabilities. This system is founded on the principles of ready access to available technology, informed choice, coordination, and maximum use of available resources and knowledge. The project created a low-interest assistive technology revolving loan fund to serve as an alternative funding mechanism for individuals ineligible for existing funding streams. Finally, the program is supported by an extensive training, education, and public awareness component. The Project is developing an equipment recycling program, and is the primary sponsor of an annual assistive technology trade fair.

Delaware Assistive Technology Initiative (DATI)

Center for Applied Science and Engineering
University of Delaware
Alfred I. duPont Hospital for Children
1600 Rockland Road
P.O. Box 269
Wilmington, DE 19899-0269
dati@asel.udel.edu
http://www.asel.udel.edu/dati

Principal Investigator: Beth A. Mineo Mollica, PhD
Public Contact: Sonja Simowitz, Project Coordinator, 800/870-DATI (V/TTY, in state only); 302/651-6790 (V); 302/651-6794 (TTY); Fax: 302/651-6793

Project Number: H224A10005
Start Date: September 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 91 $501,562; FY 92 $505,146; FY 93 $550,616; FY 94 $620,000; FY 95 $620,000; FY 96 $573,934; FY 97 $611,928; FY 98 $695,827; FY 99 $521,870
Abstract: The DATI project has established county resource centers in each of Delaware's three counties. These centers serve as information and equipment resource sites, offering short-term equipment loans, training and demonstration workshops, and regular informational mailings. DATI also offers a quarterly newsletter featuring articles on funding, equipment recycling, and general assistive technology information. DATA assists consumers in locating funding for assistive technology devices and services. Collaboration among existing state agencies and consumer groups has enhanced further assistive technology promotion throughout the state.

University Legal Services AT Program for the District of Columbia

University Legal Services
300 I Street Northeast, Suite 200
Washington, DC 20002
atpdc@uls-dc.com
http://www.atpdc.org

Principal Investigator: Alicia C. Johns
Public Contact: Information Specialist, 202/547-0198 (V); 202/547-2657 (TTY); Fax: 202/547-2662

Project Number: H224A30001
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $550,180; FY 95 $565,000; FY 96 $523,015; FY 97 $557,503; FY 98 $632,503; FY 99 $616,143
Abstract: This project's activities are designed to empower individuals with disabilities; to promote consumer involvement and advocacy; and provide information, referral, and training as they relate to accessing assistive technology services and devices; and to identify and improve access to funding resources. Activities focus on increasing access to assistive technology devices and services for school age children, public awareness, and demonstrations targeted toward individuals who are underserved. The program collaborates with public and private entities, conducts advocacy training specifically for consumers with disabilities, and implements systems change activities that increase access to, provision of, and funding for assistive technology devices and services on a permanent basis.

Florida Alliance for Assistive Service and Technology (FAAST), Inc.

FAAST, Inc.
1020 East Lafayette Street, Suite 110
Tallahassee, FL 32301-4546
faast@faast.org
http://faast.org

Principal Investigator: Terry Ward, PhD, 850/414-1179
Public Contact: Ben Greve, Program Manager, 800/322-7881 (V/TTY, in state, information and referral only); 850/487-3278 (V/TTY); 850/487-2850 (TTY/Fax); Fax: 850/487-2805

Project Number: H224A20014
Start Date: July 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $995,000 (includes carryover funding); FY 94 $730,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $922,107; FY 99 $902,700
Abstract: The focus of this project is increasing consumer awareness regarding the availability of assistive technology devices and services, and fostering advocacy and systems change. Through the state's Regional Centers, Satellites, and a statewide 800 number, consumers can obtain information about assistive technology. Through local consumer advocacy groups and a contract with the Advocacy Center for Persons with Disabilities, individuals are assured of their rights to assistive technology under state and federal laws. During the first phase, the program focused on awareness and creating consumer networks. In this phase, the focus is shifting to six priority areas: (1) the development, implementation, and monitoring of policies, practices, procedures, and organizational structures to improve access to, provision of, funding for, and timely acquisition of assistive technology devices and services; (2) the removal of barriers to obtaining these services; (3) the coordination of activities among state agencies; (4) the development and implementation of strategies to empower people with disabilities and their families to advocate successfully for assistive technology; (5) the provision of outreach to underrepresented and rural populations; and (6) the development of strategies to ensure timely acquisition of assistive technology.

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Georgia Tools for Life

Georgia Department of Human Resources
Division of Rehabilitation Services
2 Peachtree Street Northwest, Suite 35-413
Atlanta, GA 30303-3142
toolsforlife@mindspring.com
http://www.gatfl.org

Principal Investigator: Joy Kniskern
Public Contact: Clinton Fisher, 800/497-8665 (V, in state only); 404/657-3084 (V); 404/657-3086 (TTY); Fax: 404/657-3086

Project Number: H224A10001
Start Date: September 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $519,474; FY 92 $520,000; FY 93 $585,000; FY 94 $729,924; FY 95 $729,924; FY 96 $675,683; FY 97 $713,683; FY 98 $888,822; FY 99 $666,617
Abstract: The Georgia Tools for Life program includes training at all levels, public awareness, funding policy analysis, direct services, device lending libraries, and program evaluation. The hub of Tools for Life is operated out of the Georgia Division of Rehabilitation Services. Tools for Life is responsible for seven areas of coordination: (1) policy analysis and improved service delivery, (2) coordination with consumers, (3) coordination among public and private organizations, (4) training and technical assistance, (5) public awareness and an information and referral network, (6) advocacy, and (7) consumer-responsive program evaluation. Tools for Life also coordinates four Technology Resource Centers, the ReBoot Recycling Service, and is helping to create the Association of Georgians with Disabilities, a consumer association. The association includes financial services, an advocacy group, a buying co-op, insurance options, and research and development based on member needs. It also provides technical assistance to Touch the Future, a private, nonprofit organization collaborating with the Tech Act initiatives in Georgia.

Guam System for Assistive Technology (GSAT)

University of Guam, UOG Station
University Affiliated Program on Developmental Disabilities
303 University Drive
Mangilao, GU 96923
gsat@ite.net
http://uog2.uog.edu/uap/gsat.html

Principal Investigator: Heidi E. Farra-San Nicolas, PhD, 671/735-2481 (V)
Public Contact: Ben Servino, Project Coordinator, 671/735-2493 (V); 671/734-8378 (TTY); Fax: 671/734-5709

Project Number: H224A40003
Start Date: October 1, 1994
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $150,000
Abstract: This project has established a consumer-responsive, comprehensive, territory-wide program of technology-related assistance for people with disabilities to assist in overcoming Guam's unique challenges, including limited local funding, lack of trained personnel, few markets and market incentives, limited information, and limited eligibility for specific federal funding. Additionally, the provision of assistive technology devices and services in the Pacific Basin presents many unique challenges. Small island systems, such as Guam, have limited budgets, and a harsh tropical-island environment (salt water, high humidity, and rough terrain) that creates difficulties for equipment repair and maintenance. The remote geographic location makes procurement, adjustments, and custom modifications to assistive technology equipment extremely difficult and costly. The project emphasizes and supports systems change and advocacy activities that serve to build capacity within existing programs and with people with disabilities of all ages. GSAT is administered locally by the University Affiliated Program on Developmental Disabilities under the College of Education at the University of Guam.

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Assistive Technology Resource Centers of Hawaii (ATRC)

Hawaii Department of Vocational Rehabilitation Services for the Blind and Physically Handicapped
414 Kuwili Street, Suite 104
Honolulu, HI 96817
atrc@atrc.org
http://www.atrc.org

Principal Investigator: Barbara Fischlowitz-Leong, Project Director, 808/532-7110
Public Contact: Judith Clark, 808/532-7110 (V/TTY); Fax: 808/532-7120

Project Number: H224A10023
Start Date: October 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 91 $530,926; FY 92 $530,926; FY 93 $530,926; FY 94 $660,895; FY 95 $678,000; FY 96 $627,618; FY 97 $665,618; FY 98 $754,956; FY 99 $566,217
Abstract: Hawaii Assistive Technology Training and Services (HATTS) provides information and training on devices, services, and funding resources. Activities include partnerships with a variety of groups including consumers, educators, state agencies, and private organizations. HATTS also increases AT awareness and promotes self-advocacy among people with disabilities. The project subcontracts with the Protection and Advocacy Agency of Hawaii to provide legal representation. An advisory council to the project provides input from the perspective of consumers and service providers, and the project collaborates with state agency officials through its Policy Coordinating Committee.

Idaho Assistive Technology Project

University of Idaho
129 West Third Street
Moscow, ID 83844-4401
seile861@uidaho.edu
http://www.ets.uidaho.edu/idatech

Principal Investigator: Ron Seiler, Project Director
Public Contact: Michelle Doty, 800/432-8324 (V/TTY); 208/885-3559 (V/TTY); Fax: 208/885-3628

Project Number: H224A20017
Start Date: September 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $529,436; FY 93 $676,680 (includes carryover funding); FY 94 $620,000; FY 95 $634,246; FY 96 $587,115; FY 97 $625,115; FY 98 $719,907; FY 99 $698,479
Abstract: The Idaho Assistive Technology Project is managed by the Center on Disabilities and Human Development at the University of Idaho. The project engages in systems change activities, training, materials development, information dissemination, and advocacy activities directed at increasing the availability of assistive devices and services to Idahoans who have disabilities. A customer board directs the overall activities of the project and engages in a process of barrier identification and elimination. Major project components include training for consumers and service providers about assistive technology, funding and loan programs for AT, advocacy, direct service provision through five regional resource centers, and systems change that addresses policy, practice, and legislation.

Illinois Assistive Technology Project

IATP
1 West Old State Capitol Plaza, Suite 100
Springfield, IL 62701
iatp@fgi.net
http://www.iltech.org

Principal Investigator: Wilhelmina Gunther
Public Contact: Sherry Edwards, 800/852-5110 (V/TTY, in state only); 217/522-7985 (V/TTY); 217/522-9966 (TTY); Fax: 217/522-8067

Project Number: H224A90038
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $515,300; FY 90 $517,619; FY 91 $617,619; FY 92 $620,000; FY 93 $750,000; FY 94 $923,271; FY 95 $923,271; FY 96 $833,121; FY 97 $640,997; FY 98 $427,332; FY 99 $647,332
Abstract: This project's activities and objectives include information and referral services highlighting available technology and services, comprehensive advocacy training for people with disabilities and their families, and opportunities to explore assistive technology options in the demonstration center. The project has statewide consumer involvement. Consumers have input into all facets of the project's operation, from establishing goals and objectives to implementing the activities.

ATTAIN Inc. (Assistive Technology Through Action in Indiana)

ATTAIN Inc.
1002 North First Street
Vincennes, IN 47591
cfulford@indian.vinu.edu
http://attain.vinu.edu

Principal Investigator: Cris Fulford, Project Director
Public Contact: Brandon Haase, 877/812-5899 (V); 800/743-3333 (TTY); 812/888-5710; Fax: 812/888-5128

Project Number: H224A00027
Start Date: July 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,480; FY 91 $541,277; FY 92 $565,277; FY 93 $660,288; FY 94 $726,892; FY 95 $726,892; FY 96 $672,877; FY 97 $710,877; FY 98 $533,158; FY 99 $355,439
Abstract: Assistive Technology Through Action in Indiana (ATTAIN) has primary responsibility for the Indiana Technology-Related Assistance Program. The project promotes: community-based, technology-related services and systems change through outreach and training; advocacy on funding issues; policy review; position statements; and assessments.

Iowa Program for Assistive Technology

Iowa University Affiliated Program
University Hospital School
100 Hawkins Drive, Room S295
Iowa City, IA 52242-1011
mary-quigley@uiowa.edu
http://www.uiowa.edu/infotech

Principal Investigator: Jane Gay, BSN, RN; Mary Quigley, JD, 319/356-4402 (V, Quigley); 319/356-4463 (Gay)
Public Contact: Information Specialist, 800/331-3027 (V/TTY); 319/356-1514; Fax: 319/384-9273

Project Number: H224A00028
Start Date: April 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $557,322; FY 91 $594,287; FY 92 $595,289; FY 93 $700,314; FY 94 $735,000; FY 95 $735,000; FY 96 $680,382; FY 97 $718,382; FY 98 $538,787; FY 99 $359,191
Abstract: This project conducts awareness and training programs and collaborates with other systems-change efforts. The information and referral portion of the Iowa program, InfoTech, provides information on new and used adaptive equipment, funding information, and a newsletter. The goals and objectives of the Iowa Program are developed and implemented through an extensive process that involves consumers, advocacy organizations, private and public service providers, regional and state agencies, third-party payors, and entities not traditionally associated with assistive technology services.

Assistive Technology for Kansans Project

University of Kansas
Life Span Institute
2601 Gabriel Avenue
P.O. Box 738
Parsons, KS 67357
ssack@parsons.lsi.ukans.edu
http://www.atk.lsi.ukans.edu

Principal Investigator: Charles R. Spellman, EdD; Sara H. Sack, PhD
Public Contact: 800/526-3648 (800/KAN DO IT, in state only); 316/421-8367 (V/TTY); Fax: 316/421-0954 (Fax/TTY)

Project Number: H224A30013
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $515,000; FY 94 $529,999; FY 95 $550,000; FY 96 $513,758; FY 97 $551,758; FY 98 $665,404; FY 99 $643,976
Other funding: FY 93 $89,029 (Kansas Rehabilitation Services); FY 95 $395,000 (KRS); FY 96 $780,000 (KRS)
Abstract: Through consumer involvement and leadership by the Kansas University Program at Parsons, this project engages in activities that are designed to result in laws, regulations, policies, practices, or organizational structures that promote consumer-responsive programs that increase access to assistive technology devices and services. Through subcontracts with organizations across the state, the project operates five Regional Assistive Technology Access Sites, provides a toll-free number that connects callers directly to the appropriate Regional Access Site, manages an Interagency Equipment Loan System, coordinates the statewide assistive technology distance learning program, conducts a three-day Assistive Technology Conference, and leads a policy analysis and legislative alert effort.

Kentucky Assistive Technology Services (KATS) Network

Kentucky Department for the Blind
KATS Network Coordinating Center
8412 Westport Road
Louisville, KY 40242
katsnet@iglou.com
http://www.katsnet.org

Principal Investigator: J. Chase Forrester, JD, Project Director
Public Contact: Ronji Dearborn, 800/327-5287 (V/TTY, in state only); 502/327-0022 (V/TTY); 502/327-9855 (TTY); Fax: 502/327-9974

Project Number: H224A90002
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Judith Fein
NIDRR Funding: FY 89 $535,102; FY 90 $537,510; FY 91 $577,102; FY 92 $680,000; FY 93 $710,108; FY 94 $800,000; FY 95 $800,000; FY 96 $740,552; FY 97 $555,414; FY 98 $370,276; FY 99 $370,276
Abstract: This project is a statewide network of organizations and individuals connecting to enhance and incorporate assistive technology into services that improve the quality and productivity of life for the people of Kentucky. The end goal of this consumer-driven, collaborative system is to make assistive technology information, devices, and services easily obtainable for people of any age or disability. In addition to its primary role in the development and coordination of activities among state agencies and organizations that facilitate access to, provision of, and funding for assistive technology devices and services, the Coordinating Center staff conducts information and referral services using a statewide service provider database, disseminates information, coordinates training activities, publishes a newsletter, operates an equipment recycling and lending program, and implements a low interest loan program. Consumers represent a majority of the advisory board membership.

Louisiana Assistive Technology Access Network (LATAN)

LATAN
P.O. Box 14115
Baton Rouge, LA 70898-4115
cpourciau@latan.org
http://www.latan.org

Principal Investigator: Julie M. Nesbit
Public Contact: Clara Pourciau, 800/270-6185 (V/TTY); 225/925-9500 (V/TTY); Fax: 225/925-9560

Project Number: H224A10028
Start Date: September 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $502,566; FY 92 $505,398; FY 93 $555,398; FY 94 $631,095; FY 95 $660,000; FY 96 $610,955; FY 97 $648,955; FY 98 $791,475; FY 99 $593,606
Abstract: Louisiana Assistive Technology Access Network (LATAN) is an advocacy and systems change project whose mission is to ensure that Louisiana citizens with functional limitations who want assistive technology have what they need and are able to use it. Major program initiatives include: (1) consumer involvement, empowerment, and training; (2) advocacy and systems change; (3) outreach; (4) interagency coordination; and (5) provider training. In its continuing effort to reach rural and outlying areas of the state, LATAN maintains area coordinators in the northeast, northwest, southeast, and southwest quadrants of the state. These area programs provide the opportunity for LATAN to reach rural and inner-city areas, where a majority of ethnic minorities and elderly reside. LATAN provides information about aids that enable an individual to live at home, work, learn, and recreate. LATAN also provides information about the services needed to acquire and use these assistive devices. LATAN provides training which empowers individuals to self-advocate successfully for the aids they need. LATAN also advocates for increased access to assistive technology through public and private agencies and entities. LATAN provides training which increases the skills of case managers, personal service assistants, rehabilitation counselors, educators, therapists, and other providers and support personnel to recognize the benefits and uses of, and the need for, various types of assistive technology devices and services. A consumer board directs LATAN.

Maine Consumer Information and Technology Training Exchange (Maine CITE)

Coordinating Center
46 University Drive
Augusta, ME 04330
kpowers@maine.caps.maine.edu
http://www.mecite.doe.k12.me.us

Principal Investigator: David Noble Stockford, 207/287-5950 (V); 207/287-2550 (TTY)
Public Contact: Kathleen Powers, Project Director, 207/621-3195 (V); 207/621-3482 (TTY); Fax: 207/621-3193

Project Number: H224A90047
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $541,876; FY 90 $544,315; FY 91 $594,315; FY 92 $650,000; FY 93 $750,000; FY 94 $845,000; FY 95 $845,000; FY 96 $782,000; FY 97 $586,656; FY 98 $391,104; FY 99 $391,104

Abstract: This project collaborates with various Maine organizations, including centers for independent living, parent training agencies, and nonprofit community programs, to build a statewide network of information and resources on assistive technology. Project goals are: to promote broader understanding of the benefits and wider availability of assistive technology; to educate people with disabilities, their families, professionals, and general public in purchasing and using assistive technology; to promote self-advocacy among people with disabilities to shape public policy that promotes assistive technology and universal design; and to assist public and private institutions, organizations, and associations in providing the knowledge, skills, and competencies related to assistive technology and universal design to their constituents.

Maryland Technology Assistance Program (MTAP)

Maryland Governor's Office for Individuals with Disabilities
2301 Argonne Drive, Room T17
Baltimore, MD 21218
rasinski@clark.net
http://www.mdtap.org

Principal Investigator: Paul Rasinski, Project Director
Public Contact: Patrick McCurdy, 800/832-4827 (800/TECH TAP, V/TTY); 410/554-9230 (V/TTY); Fax: 410/333-6674

Project Number: H224A90019
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $502,250; FY 92 $671,029; FY 93 $770,000; FY 94 $825,000; FY 95 $825,000; FY 96 $763,694; FY 97 $572,771; FY 98 $381,000; FY 99 $381,847
Abstract: Activities of this project include conducting a public awareness campaign with a toll-free phone number, maintaining lending libraries, and maintaining an equipment demonstration center. The project uses regional technology specialists and existing state and private resources, and performs a statewide evaluation of the effectiveness of technology.

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Massachusetts Assistive Technology Partnership

Children's Hospital
1295 Boylston Street, Suite 310
Boston, MA 02215
matp@matp.org
http://www.matp.org

Principal Investigator: Marylyn Howe, Project Director, 617/355-7167 (TTY)
Public Contact: Patricia Hill, 800/848-8867 (V/TTY, in state only); 617/355-7153 (V); 617/355-7301 (TTY); Fax: 617/355-6345

Project Number: H224A00036
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $563,998; FY 91 $593,993; FY 92 $624,062; FY 93 $725,764; FY 94 $811,962; FY 95 $811,962; FY 96 $751,592; FY 97 $789,592; FY 98 $592,194; FY 99 $592,194
Abstract: The Massachusetts Assistive Technology Partnership (MATP) is a consumer-responsive, cross-disability, multicultural, statewide project that conducts activities to increase access to assistive technology for people with disabilities. Activities include public awareness, information services, training and technical assistance, funding and policy analysis, advocacy, and related work to improve services and promote involvement of people with disabilities in assistive technology. Through regional Peer Assistive Technology Programs, MATP provides information and referral, peer networking, training, and individual and systems advocacy. The MATP works closely with people with disabilities, family members, providers, and state agencies to identify needs and pursue change in the assistive technology service-delivery system. The project publishes an assistive technology newsletter, pursues remedies of funding and policy barriers, provides training on a range of assistive technology available and resources for obtaining assistive technology, pursues improvement of equipment standards, promotes increased availability of services, promotes increased involvement of people with disabilities in assistive technology services and policy making, and coordinates with related projects in Massachusetts, regionally, and nationally.

Michigan AT Project

Michigan Disability Rights Coalition
740 West Lake Lansing Road, Suite 400
East Lansing, MI 48823
roanne@sprynet.com
http://www.copower.org/At/aboutat.htm

Principal Investigator: Sheryl Avery-Meints, Project Director
Public Contact: RoAnne Chaney, 800/760-4600 (V/TTY, in state only); 517/333-2477 (V/TTY); Fax: 517/333-2677

Project Number: H224A50009
Start Date: September 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $885,881 (includes carryover funding); FY 94 $610,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,033,953; FY 99 1,012,525
Abstract: Michigan's AT Project focuses on building the capacity of community-based, local organizations to advocate for the use of assistive technology as a tool for inclusion in all aspects of life. Currently, Michigan's AT Project as projects around the state that are creating genuine systems change on a local basis that results. The AT Project also supports a Web-based system of AT resources and communication networks.

Minnesota System of Technology to Achieve Results (STAR) Program

State of Minnesota Department of Administration
Governor's Advisory Council on Technology for People with Disabilities
300 Centennial Building
658 Cedar Street
St. Paul, MN 55155
star.program@state.mn.us
http://www.admin.state.mn.us/assistivetechnology

Principal Investigator: Ronna Linroth
Public Contact: 800/657-3862 (V, in state only); 800/657-3895 (TTY, in state only); 651/296-2771 (V); 651/296-8478 (TTY); Fax: 651/282-6671

Project Number: H224A90041
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $567,250; FY 92 $700,000; FY 93 $750,000; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $694,268; FY 98 $569,300; FY 99 $379,500
Abstract: This project: (1) provides a toll-free information service for residents of Minnesota and Iowa; (2) distributes brochures and other literature; (3) hosts workshops and forums; (4) provides opportunities for consumer involvement; and (5) assists individuals seeking funding. STAR advocates for policy, practice, and legislative change regarding access to assistive technology; contracts for mobile outreach projects and legal advocacy services; and provides grants on a regional basis.

Mississippi Project START (Success Through Assistive/Rehabilitative Technology)

Mississippi Department of Rehabilitation Services
P.O. Box 1698
Jackson, MS 39215-1000
spower@netdoor.com

Principal Investigator: Stephen Power, Project Director
Public Contact: Albert Newsome, 800/852-8328 (V/TTY, in state only); 601/987-4872 (V/TTY); Fax: 601/364-2349

Project Number: H224A00032
Start Date: May 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,285; FY 91 $530,000; FY 92 $554,000; FY 93 $594,714; FY 94 $619,430; FY 95 $619,430; FY 96 $573,400; FY 97 $611,400; FY 98 $458,550; FY 99 $305,700
Abstract: Project START is a multifaceted, collaborative effort. The primary components include: (1) an advisory council that allows for consumer input and the involvement of other relevant agencies, organizations, and groups; (2) an information clearinghouse that provides people with disabilities, their families, service providers, and other interested parties with information regarding available assistive technology devices and services; (3) a training program that ensures that service provider personnel, people with disabilities, and other relevant parties are familiar with the utility and potential of assistive technology devices; (4) a model service-delivery system that acts as a referral source and concurrent technical resource to existing assistive technology providers, and provides assistive technology services to people with disabilities ineligible for existing programs; and (5) an equipment loan program that makes assistive devices available to people with disabilities for trial periods, for use while their personal equipment is being repaired or replaced, and to service providers for training and demonstration purposes.

Missouri Assistive Technology Project

Missouri Department of Labor and Industrial Relations
Governor's Council on Disability
4731 South Cochise, Suite 114
Independence, MO 64055-6975
matpmo@qni.com
http://www.dolir.state.mo.us/matp

Principal Investigator: Diane Golden, PhD, Project Director
Public Contact: 800/647-8557 (V, in state only); 800/647-8558 (TTY, in state only); 816/373-5193 (V); 816/373-9315 (TTY); Fax: 816/373-9314

Project Number: H224A30015
Start Date: September 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $524,488; FY 92 $526,988; FY 93 $550,801; FY 94 $667,121; FY 95 $675,000; FY 96 $689,639; FY 97 $727,639; FY 98 $878,221; FY 99 $658,666
Abstract: The primary components of this project include: (1) an advisory council established to provide input from consumers and relevant state agencies; (2) legislative and policy initiatives including an equipment loan program, an equipment distribution program through the state relay service, health care coverage for mandatory infant hearing screenings and initial amplification devices, Medicaid coverage of augmentative communication devices for adults, an assistive technology lemon law, sales tax exemptions on assistive technology, managed care reform, and accessible state information technology; (3) an information and referral service; and (4) individual advocacy services.

MonTECH

Rural Institute on Disabilities
University of Montana
634 Eddy Avenue
Missoula, MT 59812
montech@selway.umt.edu
http://rudi.montech.umt.edu

Principal Investigator: Gail McGregor, Project Director
Public Contact: 800/732-0323 (V/TTY); 406/243-5676 (V/TTY); Fax: 406/243-4730

Project Number: H224A10002
Start Date: September 30, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $550,553; FY 92 $550,553; FY 93 $590,553; FY 94 $675,258; FY 95 $673,058; FY 96 $624,080; FY 97 $663,080; FY 98 $752,408; FY 99 $564,306
Abstract: This project develops a comprehensive statewide system of technology-related assistance to ensure that all Montanans with disabilities have equitable access to the assistive technology devices and services they need. Emphasis is on eliminating barriers to obtaining assistive technology, enacting policy change, improving awareness, strengthening consumer and provider networks, and increasing access to funding. The Montana Consortium for Assistive Technology (MCAT) serves as the program advisory board and offers opportunities for consumer participation. Activities currently underway include: (1) a comprehensive equipment demonstration and evaluation center offering hands-on experience with devices to both consumers and service providers; (2) an assistive technology loan/lease clearinghouse; (3) an information and assistance service that includes maintenance of a comprehensive database of Montana service programs; (4) focused outreach activities with the state's largest minority group, Native Americans; and (5) an Internet Web site. Other activities include a low-interest financial loan program for consumers who do not qualify for other funding sources, and specialized training programs to increase the skills of professionals providing assistive technology services.

Nebraska Assistive Technology Partnership

Nebraska Department of Education
Division of Vocational Rehabilitation
5143 South 48th Street, Suite C
Lincoln, NE 68516-2204
atp@atp.state.ne.us
http://www.edneb.org/ATP/TECHome.html

Principal Investigator: Mark Schultz, Project Director
Public Contact: Kathryn Kruse, 888/806-6287 (V/TTY, in state only); 402/471-0734 (V/TTY); 402/471-0735 (V/TTY); Fax: 402/471-6052

Project Number: H224A90040
Start Date: October 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $523,000; FY 90 $525,352; FY 91 $570,352; FY 92 $730,000; FY 93 $766,984; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $569,300; FY 98 $379,533; FY 99 $379,533
Abstract: This project has established an information and referral network, demonstration centers, a peer network, and special studies on payment practices. It has also developed training materials for health care and insurance professionals and computer databases for used equipment listings. A three-hour instructional unit on *Assistive Technology in the Classroom* is available for purchase and a special education technical manual has been written.

Nevada Assistive Technology Collaborative

Nevada Rehabilitation Division
Community-Based Services
711 South Stewart Street
Carson City, NV 89710
pgowins@govmail.state.nv.us
http://www.state.nv.us/detr/rehab/reh_pgbs.htm#State Assistive Technology Act Program

Principal Investigator: Donny Loux
Public Contact: Paul Haugen, 888/337-3839 (V, in state only); 775/687-4452 (V); 775/687-3388 (TTY); Fax: 775/687-3292

Project Number: H224A00037
Start Date: July 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $560,884; FY 91 $580,047; FY 92 $594,368; FY 93 $624,588; FY 94 $675,046; FY 95 $675,046; FY 96 $624,883; FY 97 $662,883; FY 98 $497,162; FY 99 $331,442
Abstract: The Nevada Project is accomplishing 15 major goals in systems change that have been established in response to identified needs in consultation with the state's consumer-directed executive board. Additionally, the project trains 400 consumers in the use of technology; a minimum of 1,800 consumers in self-advocacy skills; 550 families in applying technology to the needs of a family member with a disability; and a minimum of 5,730 cross-disciplinary university undergraduates in the fields of medicine, health, education, rehabilitation, gerontology, engineering, speech pathology and audiology, and counseling in assistive technology and cultural awareness. The project provides information and referral and other awareness services to a minimum of 10,000 consumers over the life of the project and evaluates the impact of those services through follow-up and satisfaction surveys.

New Hampshire Technology Partnership Project

University of New Hampshire Technology Partnership
Institute on Disability
The Concord Center
#14 Ten Ferry Street
Concord, NH 03301-5019
meschuh@cisunix.unh.edu
http://www.iod.unh.edu/assist.htm

Principal Investigator: Jan Nisbet, PhD; Terese Wilkomm, PhD, 603/862-4320 (V/TTY)
Public Contact: 800/427-3338 (V/TTY, in state only); 603/224-0630 (V/TTY); Fax: 603/226-0389

Project Number: H224A10015
Start Date: September 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 91 $506,307; FY 92 $505,008; FY 93 $550,008; FY 94 $635,000; FY 95 $635,000; FY 96 $587,813; FY 97 $625,813; FY 98 $717,815; FY 99 $538,361
Abstract: This project provides extensive training and network development focused on: (1) early intervention; (2) inclusive education; (3) supported living and employment; and (4) using alternative and augmentative communication to develop free expression and citizenship. Recycled equipment, demonstration and training, and information and referral are also available. The project's lead agency is the Institute on Disability, a University Affiliated Program at the University of New Hampshire. Additional subcontracts have been awarded to Granite State Independent Living, Disabilities Rights Center, and New Hampshire Alliance for Assistive Technology.

New Jersey Technology Assistive Resource Program (TARP)

New Jersey Protection and Advocacy, Inc.
210 South Broad Street, Third Floor
Trenton, NJ 08608
packro@njpanda.org
http://www.njpanda.org

Principal Investigator: Ellen Lence, Project Director
Public Contact: 800/342-5832 (V, in state only); 609/633-7106 (TTY); 609/777-0945; Fax: 609/777-0187

Project Number: H224A20007
Start Date: September 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $548,050; FY 93 $670,528 (includes carryover funding); FY 94 $548,050; FY 95 $550,000; FY 96 $509,130; FY 97 $547,130; FY 98 $710,380; FY 99 $688,800
Abstract: TARP is a consumer-driven program whose mission is to increase awareness of and improve access to assistive technology for all people with disabilities in the state. TARP provides information and referral through its 800 telephone number regarding all aspects of assistive technology. TARP also provides advocacy services, both legal and nonlegal, addressing both individual and systems issues. In addition, TARP provides training and technical assistance, as well as outreach regarding the benefits of and funding for assistive technology devices and services. TARP disseminates brochures, program videos, funding guides, and informational bulletins.

New Mexico Technology Assistance Program (NMTAP)

New Mexico State Department of Education
Division of Vocational Rehabilitation
435 Saint Michaels Drive, Building D
Santa Fe, NM 87505
billn@state.nm.us
http://www.nmtap.com

Principal Investigator: Alan Klaus, Project Director
Public Contact: Carol Cadena, 800/866-2253 (V/TTY); 800/659-4915 (TTY); 505/954-8533 (V/TTY); Fax: 505/954-8562

Project Number: H224A00017
Start Date: April 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $500,500; FY 91 $515,500; FY 92 $525,000; FY 93 $660,710; FY 94 $750,000; FY 95 $750,000; FY 96 $694,000; FY 97 $732,268; FY 98 $549,201; FY 99 $366,134
Abstract: NMTAP examines and works to eliminate barriers to obtaining assistive technology in New Mexico. The project has established a statewide program for coordinating assistive technology services; the program is designed to assist people with disabilities to locate, secure, and maintain assistive technology that can increase, maintain, or improve functional capabilities of people with disabilities. This program is a resource both for people requiring assistive technology and those that manufacture and provide assistive technology devices or services. The program focuses on permanently eliminating barriers in three major areas: access to, availability of, and funding for assistive technology.

New York State Technology-Related Assistance of Individuals with Disabilities (TRAID) Project

New York State Office of Advocate for Persons with Disabilities
TRAID Project
One Empire State Plaza, Suite 1001
Albany, NY 12223-1150
traid@emi.com
http://www.state.ny.us/disabledadvocate/TRAID_Project/technlog.htm

Principal Investigator: Deborah Buck, Project Director
Public Contact: 800/522-4369 (V/TTY/Spanish, in state only); 518/474-2825 (V); 518/473-4231 (TTY); Fax: 518/473-6005

Project Number: H224A00041
Start Date: October 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $500,000; FY 91 $600,000; FY 92 $615,000; FY 93 $820,961; FY 94 $950,000; FY 95 $950,000; FY 96 $879,406; FY 97 $917,406; FY 98 $688,054; FY 99 $458,703
Abstract: The Technology-Related Assistance of Individuals with Disabilities (TRAID) Project has been established to improve access to assistive technology through consumer-responsive interventions to effect systemic change on a policy, regulatory, and legislative level. Project staff members chair and facilitate the workings of the NYS Interagency Partnership on Assistive Technology, a group designed to collaborate with a consumer-majority advisory board to identify systemic barriers to assistive technology devices and services and collaborate on strategies to address the barriers. In collaboration with the NYS Department of Health, Early Intervention Program, and Bell Atlantic, the local telecommunications corporation, the TRAID Project administers 12 Regional TRAID Centers that operate device demonstration and loan services, coordinate local information and referral, and support individualized self-advocacy. The TRAID Project also provides information and referral regarding assistive technology, provides training and public awareness, and administers the TRAID-IN Equipment Exchange service.

North Carolina Assistive Technology Project

North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services
1110 Navaho Drive, Suite 101
Raleigh, NC 27609-7322
ncatp@mindspring.com
http://www.mindspring.com/~ncatp

Principal Investigator: Ricki Cook, Project Director
Public Contact: 919/850-2787 (V/TTY); Fax: 919/850-2792

Project Number: H224A00010
Start Date: July 1, 1990
Phase: 4th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $566,425; FY 91 $595,441; FY 92 $625,843; FY 93 $730,152; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $797,066; FY 98 $597,800; FY 99 $398,533
Abstract: This project provides information and referral services, technical assistance, and training seminars and materials. It supports four regional demonstration centers that provide demonstration and trial of devices. The project's central office in Raleigh coordinates systems change and advocacy, policy, and funding issues statewide. The North Carolina Division of Vocational Rehabilitation Services provides the project with internal management systems, agency resources, and fiscal management.

North Dakota Interagency Program for Assistive Technology (IPAT)

North Dakota Department of Human Services
Office of Vocational Rehabilitation
P.O. Box 743
Cavalier, ND 58220
lee@pioneer.state.nd.us
http://www.ndipat.org

Principal Investigator: Judith A. Lee, Project Director
Public Contact: 800/265-4728 (V/TTY); 701/265-4807 (V/TTY); Fax: 701/265-3150

Project Number: H224A30003
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $540,000; FY 95 $540,000; FY 96 $509,130; FY 97 $547,130; FY 98 $633,103; FY 99 $611,000

Abstract: The Interagency Program for Assistive Technology is dedicated to supporting the assistive technology (AT) needs of all people with disabilities in North Dakota, including those individuals experiencing the effects of aging. The vision of this project is increased access to assistive technology devices and services for the citizens of North Dakota. This goal is realized through: (1) interagency coordination that develops and promotes policies that improve access to assistive technology devices and services for individuals with disabilities of all ages; (2) a public awareness program designed to provide information to targeted individuals relating to the availability and benefits of assistive technology devices and services; (3) technical assistance and training that provides support to public and private entities to increase consumer access to appropriate assessments, training, equipment, and funding for assistive technology; and (4) outreach activities to all regions of this rural and sparsely populated state, including a focus on Native Americans and older individuals living below the poverty level, the two population groups identified as underrepresented in North Dakota.

Commonwealth of the Northern Mariana Islands (CNMI) Assistive Technology Project - System of Technology-Related Assistance for Individuals with Disabilities (STRAID)

CNMI Governor's Developmental Disabilities Council
Capitol Hill
P.O. Box 2565
Saipan, MP 96950
clamkin@cnmiddcouncil.org; straid@cnmiddcouncil.org
http://www.cnmiddcouncil.org/atstraid/atflash.htm

Principal Investigator: Thomas J. Camacho, Project Director, 670/664-7000 (V)
Public Contact: 670/322-3014 (V/TTY); Fax: 670/322-4168

Project Number: H224A40007
Start Date: October 1, 1994
Phase: 1st year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $105,000
Abstract: This project provides technology-related assistance for people with disabilities in the Commonwealth of the Northern Mariana Islands. The project focuses on the development of a locally-based system for the technology-related needs of children, youth, and adults with disabilities. The primary objective of this project is to enhance opportunities for people with disabilities in the Commonwealth to become independent, productive, integrated, and fully included in the community. Through increased emphasis on coordination with agencies or organizations that provide or pay for the provision of assistive technology devices or services, the Developmental Disabilities Council is building and activating a system that responds to people with disabilities' needs to: (1) have greater control over their lives; (2) participate in, and contribute more fully to, activities in their home, school, work environments, and in the community; (3) interact to a greater extent with individuals who do not have disabilities; and (4) benefit from opportunities that are taken for granted by individuals who do not have disabilities.

Assistive Technology of Ohio (AT-OHIO)

Ohio State University Research Foundation
J.L. Camera Center
2050 Kenny Road, 9th Floor
Columbus, OH 43221
truman.10@osu.edu
http://atohio.org

Principal Investigator: Sheldon R. Simon, MD
Public Contact: Douglas Huntt, Executive Director, 800/784-3425 (V/TTY, in state only); 614/292-2426 (V/TTY); 614/292-3162 (TTY); Fax: 614/292-5866

Project Number: H224A40001
Start Date: August 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $522,100; FY 93 $522,000; FY 94 $770,113; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $815,688; FY 99 $794,260
Abstract: This project represents consumers of assistive technology in the state of Ohio. It assists in the development and implementation of strategies to overcome barriers regarding access to, provision of, and funding for, assistive technology services and devices, with priority for identification of barriers to funding through state education (including special education), vocational rehabilitation services, medical assistance services, and, as appropriate, other health and human services, with particular emphasis on overcoming barriers for underrepresented and rural populations.

Oklahoma ABLE Tech

Oklahoma State University
University Wellness Center
1514 West Hall of Fame Road
Stillwater, OK 74078-2026
mljwell@okway.okstate.edu
http://www.okstate.edu/wellness/at-home.htm

Principal Investigator: Jim Rogers, Project Director
Public Contact: Linda Jaco, Project Manager, 800/257-1705 (V/TTY); 405/744-9748 (V); Fax: 405/744-2487

Project Number: H224A50007
Start Date: July 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $530,000; FY 93 $668,524 (includes carryover funding); FY 94 $530,000; FY 95 $575,000; FY 96 $532,272; FY 97 $570,272; FY 98 $695,237; FY 99 $673,809
Abstract: The mission of ABLE Tech is to facilitate systems change to enhance the provision of, access to, and funding for assistive technology so that individuals with disabilities can achieve their greatest potential. ABLE Tech conducts statewide project activities, including public awareness, training and technical assistance, funding and policy development, individual and systems advocacy, and project coordination. The project also provides regional information and referral, and legal advocacy.

Oregon Technology Access for Life Needs (TALN)

Oregon Disabilities Commission
c/o Access Technologies, Inc.
3070 Lancaster Drive Northeast
Salem, OR 97305-1396
ati@orednet.org
http://www.taln.ncn.com

Principal Investigator: Byron McNaught, Project Director
Public Contact: 800/677-7512 (V/TTY, in state only); 503/361-1201 (V/TTY); Fax: 503/370-4530

Project Number: H224A50002
Start Date: April 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $540,000; FY 91 $555,000; FY 92 $575,000; FY 93 $620,000; FY 94 $670,000; FY 95 $670,000; FY 96 $620,212; FY 97 $658,212; FY 98 $493,659; FY 99 $329,106
Abstract: This project uses existing resources including community colleges, medical, rehabilitation, educational, and recreational and adaptive sports programs, the state library system, federally funded technology projects currently in existence in Oregon, and state agencies to expand the availability of assistive technology in Oregon. Projects include an exhibit to increase public awareness, a toll-free number for information and referral, training programs, equipment loan banks and demonstration labs, and a database on used equipment.

Pennsylvania's Initiative on Assistive Technology (PIAT)

Temple University
Institute on Disabilities/UAP
1301 Cecil B. Moore Avenue, 423 Ritter Annex
Philadelphia, PA 19122
piat@astro.ocis.temple.edu
http://www.temple.edu/inst_disabilities/PIAT

Principal Investigator: Diane Bryen, PhD; Amy S. Goldman
Public Contact: Amy S. Goldman, 800/204-7428 (V); 800/750-7428 (TTY); 215/204-5966 (V); 215/204-1356 (V/TTY); Fax: 215/204-9371

Project Number: H224A20006
Start Date: September 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $602,623; FY 94 $730,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,049,575; FY 99 $1,028,147
Abstract: This project focuses on the creation of a consumer responsive system, supported by combined public and private resources, through which Pennsylvanians with disabilities (including older Pennsylvanians) have access to the assistive technology services and supports they need to contribute to and participate fully in their communities. Major functional areas include public awareness, information and referral, individual advocacy and systems change, and training. PIAT has established a network of regional Assistive Technology Resource Centers (ATRCs). ATRCs are also a key to Pennsylvania's Assistive Technology Lending Library, a state funded program based on the pilot short-term equipment loan program established by PIAT. The Pennsylvania Assistive Technology Foundation was established with the assistance of PIAT, and has made cash loans for the purchase of assistive technology beginning in the Fall of 1998, as an independent 501(c) (3).

Puerto Rico Assistive Technology Project

University of Puerto Rico
Medical Sciences Campus
College of Health Related Professions
Office of Project Research and Development
Box 365067
San Juan, PR 00936-5067
pratp@coqui.net
http://home.coqui.net/pratp

Principal Investigator: Maria I. Miranda
Public Contact: 800/496-6035 (V/TTY, from the U.S.); 800/981-6033 (V/TTY, from Puerto Rico); 787/758-2525, ext. 4413; 787/754-8034 (TTY); Fax: 787/754-8034

Project Number: H224A70001
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $545,000; FY 95 $555,000; FY 96 $513,758; FY 97 $551,758; FY 98 $692,202; FY 99 $670,774
Abstract: This project establishes a comprehensive islandwide system of AT services to maximize and enhance existing resources in Puerto Rico. This system is timely and consumer-responsive to the needs of people with disabilities. The project's main focus is to influence the system through collaborative efforts with public and private agencies to guarantee equal opportunity and access to assistive technology by people with disabilities in Puerto Rico. The Assistive Technology Program is administered by the University of Puerto Rico, Medical Sciences Campus, Office of Research and Development.

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Rhode Island Assistive Technology Access Partnership (ATAP)

Rhode Island Department of Human Services
Office of Rehabilitation Services
40 Fountain Street
Providence, RI 02903-1898
solson@atap.state.ri.us
http://www.atap.state.ri.us

Principal Investigator: Raymond A. Carroll, Administrator
Public Contact: Susan Olson, Project Director, 800/752-8088 (in state only); 401/421-7005, ext. 310 (V); 401/421-7016 (TTY); Fax: 401/421-9259

Project Number: H224A30012
Start Date: October 1, 1993
Phase: 1st year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $538,000; FY 98 $624,467; FY 99 $603,039
Abstract: The Rhode Island Assistive Technology Partnership (ATAP) is a statewide partnership of organizations, each with a targeted focus, who work together with a consumer council (Rhode Island Council on Assistive Technology) to remove barriers and increase access to assistive technology for individuals with disabilities of all ages.

South Carolina Assistive Technology Program (SCATP)

University of South Carolina School of Medicine
Center for Disability Resources
Columbia, SC 29208
jjendron@usit.net; evelyne@cdd.sc.edu
http://www.public.usit.net/jjendron

Principal Investigator: Richard Ferrante, 803/935-5231 (V)
Public Contact: Evelyn Evans, Project Director, 803/935-5263 (V/TTY); Fax: 803/935-5342

Project Number: H224A60001
Start Date: October 1, 1991
Phase: 4th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $541,767; FY 92 $541,767; FY 93 $595,767; FY 94 $720,000; FY 95 $720,000; FY 96 $667,000; FY 97 $704,497; FY 98 $829,535; FY 99 $622,088
Abstract: This project is the catalyst for uniting assistive technology services statewide into an easily accessible system that is responsive to the needs of all South Carolinians with disabilities. SCATP collaborates with state agencies, policy makers, and private entities to overcome barriers that prevent people from getting the devices and services they need for full and productive lives. Systems change activities are developed with a three-tiered approach: to state agency administrators, service providers, and consumers. Rather than direct provision of services, SCATP focuses on strengthening systems so that they are mutually reinforcing and self-sustaining; the major funding streams of the Vocational Rehabilitation Department, Medicaid, the Department of Education, and private insurance are targeted. Systems change activities are connected to training and technical assistance activities, that are in turn supportive of systems change. All activities are guided by input from and responsiveness to consumers and their families.

South Dakota Assistive Technology Project (DakotaLink)

DakotaLink
221 South Central
Pierre, SD 57501
dvogel@tie.net
http://dakotalink.tie.net

Principal Investigator: Grady Kickul, 605/773-3195 (V)
Public Contact: Dave Vogel, 800/224-5336 (V/TTY, in state only); 605/224-5336 (V/TTY); Fax: 605/224-8320

Project Number: H224A20019
Start Date: July 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $520,000; FY 93 $520,000; FY 94 $620,000; FY 95 $650,000; FY 96 $601,699; FY 97 $601,699; FY 98 $728,100; FY 99 $700,000
Abstract: To achieve systems change, DakotaLink works with consumers, state and private agencies, and organizations who provide services to, or advocate for, people with disabilities to identify and eliminate barriers to individuals receiving assistive technology devices or services in a timely manner. The project uses a mobile unit, outreach coordinators, rehabilitation technicians, and training programs as a catalyst to: (1) reach the most underserved areas; (2) provide advocacy training for people with disabilities and their representatives; and (3) provide information support to all individuals regarding access to, provision of, and funding for assistive technology devices and services. DakotaLink continues to use a Native American Outreach Coordinator to reach specifically that underserved population.

Tennessee Technology Access Project (TTAP)

State of Tennessee Department of Mental Health/Mental Retardation
Division of Mental Health
Andrew Johnson Tower, Tenth Floor
710 James Robertson Parkway
Nashville, TN 37243-0675
jlewis@mail.state.tn.us
http://www.state.tn.us/mental/ttap.html

Principal Investigator: John Lewis, Project Director
Public Contact: 615/532-9986 (V); Fax: 615/253-1998

Project Number: H224A00003
Start Date: July 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $550,000; FY 91 $553,675; FY 92 $553,675; FY 93 $640,800; FY 94 $665,000; FY 95 $665,000; FY 96 $615,584; FY 97 $653,584; FY 98 $490,188; FY 99 $326,792
Abstract: The Tennessee project emphasizes the implementation and pursuit of systems change and advocacy activities by developing an information/communication network, working with state agency policy values, and developing alternate funding mechanisms. The administrative/organizational structure involves consumers, and facilitates interagency cooperation and interaction with the private sector.

Texas Assistive Technology Partnership

University of Texas at Austin
Texas University Affiliated Program
SZB 252 - D5100
Austin, TX 78712-1290
s.elrod@mail.utexas.edu
http://tatp.edb.utexas.edu

Principal Investigator: Susanne Elrod, Project Director
Public Contact: John Moore, 800/828-7839 (V/TTY, in state only); 512/471-7621 (V); 512/471-1844 (TTY); Fax: 512/471-7549

Project Number: H224A20012
Start Date: August 1, 1992
Phase: 3rd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $550,000; FY 94 $550,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,167,518; FY 99 $1,146,080
Abstract: Major components include public policy advocacy and statewide systems change, protection and advocacy services (Advocacy, Inc., a protection and advocacy system), assistive technology and telecommunications access training, information and referral, and statewide public awareness activities.

U.S. Virgin Islands Technology-Related Assistance for Individuals with Disabilities (TRAID)

University of the Virgin Islands
Virgin Islands University Affiliated Program (VIUAP)
#2 John Brewer Bay
St. Thomas, USVI 00801-0990
yhabtey@uvi.edu; clewis@uvi.edu
http://www.uvi.edu/pub-relations/viuapindx.html

Principal Investigator: Christine Lewis
Public Contact: 340/693-1323; Fax: 340/693-1325

Project Number: H224A50005
Start Date: October 1, 1995
Phase: 2nd year of the 1st extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $105,000
Other funding: FY 95 $6,400
Abstract: The Virgin Islands project disseminates necessary information on assistive technologies for people with disabilities and provides a venue for device demonstration through the establishment of two resource centers, on the islands of St. Thomas and St. Croix. The project is also initiating an assistive technology loan library.

Utah Assistive Technology Program (UATP)

Utah State University
Center for Persons with Disabilities
6588 Old Main Hill
Logan, UT 84322-6588
marty@cpd2.usu.edu
http://www.uatp.usu.edu

Principal Investigator: Marvin Fifield, EdD, Project Director; Martin E. Blair, Project Coordinator, 435/797-1982
Public Contact: 435/797-3824 (V/TTY); Fax: 435/797-2355

Project Number: H224A90051
Start Date: November 1, 1989
Phase: 11th year
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $505,445; FY 90 $507,720; FY 91 $559,720; FY 92 $696,224; FY 93 $788,526; FY 94 $800,000; FY 95 $800,000; FY 96 $740,560; FY 97 $555,414; FY 98 $370,276; FY 99 $370,276
Abstract: The Utah Assistive Technology Program (UTAP) provides expertise, resources, and a structure to enhance and expand AT services provided by private and public agencies in Utah. This occurs through monitoring, coordination, information dissemination, empowering individuals, the identification and removal of barriers, and expanding state resources. Primary components of UTAP include: (1) the Utah Center for Assistive Technology, a statewide service hub; (2) Assistive Technology Access Centers located in rural independent living centers; (3) outreach to those over the age of 65 years and their service providers; (4) the Utah Assistive Technology Foundation providing low-interest loans to consumers; (5) the Consumer Council whose primary interest is to identify barriers; (6) the Management and Implementation Board, made up of state service agency representatives (usually the director) that take appropriate action to remove barriers; (7) consumer technical services provided by the Assistive Technology Development and Fabrication Laboratory at Utah State University; and (8) an equipment reutilization program.

Vermont Assistive Technology Project

Vermont Department of Aging and Disabilities
103 South Main Street, First Floor
Waterbury, VT 05671-2305
lynnec@dad.state.vt.us
http://www.dad.state.vt.us/atp

Principal Investigator: Lynne Cleveland, Project Director
Public Contact: 800/750-6355 (V/TTY, in state only); 802/241-2620 (V/TTY); Fax: 802/241-2174

Project Number: H224A00023
Start Date: July 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $553,048; FY 91 $560,577; FY 92 $581,417; FY 93 $705,000; FY 94 $700,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $514,487; FY 99 $342,991
Abstract: The Vermont Assistive Technology Project encompasses a state coordinating council for assistive technology issues; regional centers for demonstration, trial, and technical support with computer and augmentative communication equipment; and regional seating and positioning centers. The project affects change in policies and procedures of public and private agencies, and maintains a used equipment recycling program. It supports an annual computer training institute for educators and an annual recreation equipment expo. The project continues to expand Web access to AT information and resources, and to integrate AT knowledge and expertise into existing public and private agencies. The Project supports a two-year program in Rehabilitation Engineering Technology at Vermont Technical College. The program was the first of its kind in the nation.

Virginia Assistive Technology System (VATS)

Virginia Department of Rehabilitative Services
8004 Franklin Farms Drive
Richmond, VA 23288-0300
vatskhk@aol.com
http://www.vats.org

Principal Investigator: Kenneth Knorr, Project Director
Public Contact: 800/552-5019 (V/TTY); 804/662-9990 (V/TTY); Fax: 804/662-9478

Project Number: H224A00009
Start Date: June 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $550,000; FY 91 $562,500; FY 92 $578,883; FY 93 $685,331; FY 94 $663,467; FY 95 $745,000; FY 96 $689,639; FY 97 $727,639; FY 98 $545,729; FY 99 $363,820
Abstract: The Virginia Assistive Technology System (VATS) provides coordination at three levels: state policy, through the mechanism of interagency agreements; project management, through the mechanism of the advisory council; and at the local and regional level, through four assistive technology regional sites. Activities include information and referral services, technical assistance, training materials and seminars, and creative grant programs and policy development. The project has produced a textbook, *Assistive Technology: A Resource for School, Work, and Community* (Brookes Publishing) and a *National Study of Loan Financing Programs.*

Washington Assistive Technology Alliance (WATA)

DSHS/DVR, AT Resource Center
University of Washington
Box 357920
Seattle, WA 98195-7920
uwat@u.washington.edu
http://wata.org

Principal Investigator: Jeanne Munro, 360/438-8008 (V); 360/438-8644 (TTY)
Public Contact: Debbie Cook, Project Director, 800/841-8345 (V/TTY, in state only); 206/685-4181 (V); 206/616-1396 (TTY); Fax: 206/543-4779

Project Number: H224A30006
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $525,090; FY 94 $580,000; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $739,639; FY 99 $700,000
Abstract: Activities for this project include information, consultation, and training related to selection of technology devices, services, and funding; legal advice and advocacy; policy development; legislative action; technical consultation and training; publications; and online resources. WATA is a consumer advocacy network that includes the AT Resource Center at the University of Washington, the AT Resource Center at Easter Seal Society in Spokane, and the Washington Protection and Advocacy System. The project is administered by the state Division of Vocational Rehabilitation with guidance from the Consumer Majority Advisory Board.

West Virginia Assistive Technology System (WVATS)

University Affiliated Center for Developmental Disabilities
Airport Research and Office Park
955 Hartman Run Road
Morgantown, WV 26505
jstewart@wvu.edu
http://www.wvu.edu/~uacdd/wvats/wvat.htm

Principal Investigator: Janice A. Holland, 304/766-4694 (V)
Public Contact: Jack Stewart, Project Manager, 800/841-8436 (V/TTY, in state only); 304/293-4692 (V/TTY); Fax: 304/293-7294

Project Number: H224A20011
Start Date: July 1, 1992
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $530,000; FY 93 $530,000; FY 94 $620,000; FY 95 $620,000; FY 96 $573,928; FY 97 $611,928; FY 98 $716,068; FY 99 $716,068
Abstract: The WVATS project seeks to improve the availability of assistive technology (AT) by improving existing AT services, facilitating coordination of AT service-delivery programs, identifying and remediating gaps in services, and promoting, developing, and/or delivering new services. These systemic changes are carried out in response to and consonant with consumer advice, direction, and consent. The West Virginia project has a board composed primarily of consumers and their families. State organizations and agencies provide guidance, structure, and input. WVATS uses a "core" system directed by a board, overseen by the Division of Rehabilitation Services, and managed on a day-to-day basis by the West Virginia University Affiliated Center for Developmental Disabilities. WVATS supports program staff, an information and referral system with a toll-free number, two resource centers, a statewide awareness campaign, training programs, and seven regional technology-related assistance teams.

WisTech

Wisconsin Assistive Technology Program
Division of Supportive Living
1 West Wilson Street, Room 450
P.O. Box 7851
Madison, WI 53707-7851
drennvi@dhfs.state.wi.us
http://www.dhfs.state.wi.us/Aging/wistech/wistech.htm

Principal Investigator: Dan Johnson, Acting Project Director
Public Contact: 608/266-9303 (V/TTY); 608/267-9880 (TTY); Fax: 608/267-3203

Project Number: H224A00013
Start Date: May 1, 1990
Phase: 5th year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $572,871; FY 91 $575,000; FY 92 $590,313; FY 93 $685,488; FY 94 $730,000; FY 95 $730,000; FY 96 $675,754; FY 97 $713,754; FY 98 $535,315; FY 99 $356,877
Abstract: The Wisconsin initiative focuses on systems change through a combination of state policy focus, use of the state's Protection and Advocacy Agency (Wisconsin Coalition for Advocacy), and the state's independent living centers (ILCs). The ILCs, in eight regions of the state, provide advocacy for consumers in related assistive technology cases at the local level. Cases of significance or that require technical assistance are referred to the Protection and Advocacy Agency, or the state program for advocacy work. WisTech continues to optimize consumer control and involvement by obtaining direction from its state consumer advisory board, which is made up of 51 percent consumers or parents. WisTech works to obtain additional state money to finance a consumer assistive technology loan program and to continue to fund the assistive technology loan/try-out programs at the ILCs.

Wyoming's New Options in Technology (WYNOT)

University of Wyoming
Wyoming Institute for Disabilities (WIND)
1465 North Fourth Street, Suite 111
Laramie, WY 82072
wynot.uw@uwyo.edu
http://wind.uwyo.edu/wynot/wynot.htm

Principal Investigator: Keith Miller, 307/766-2764 (V)
Public Contact: 800/861-4312 (V/TTY, in state only); 307/766-2084 (V/TTY); Fax: 307/721-2084

Project Number: H224A60002
Start Date: October 1, 1993
Phase: 2nd year of the 2nd extension
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $620,502; FY 99 $599,074

Abstract: Wyoming New Options in Technology (WYNOT) is a project designed to develop and implement a consumer directed statewide system of technology-related assistance for people with disabilities of all ages. The Assistive Technology Advisory Council (ATAC), which consists of consumers or their parents or representatives, oversees project goals. The remainder of the ATAC consists of state agency representatives and vendors who can influence systems change and advocacy activities. Systems Change Teams (SCTs), located throughout the state, gather and disseminate information on a local basis and help identify barriers. Protection and Advocacy (P&A) conducts advocacy training and provides legal representation for people with disabilities who have been denied access to assistive technology services or devices. WYNOT provides information and referral services; operates an equipment loan bank and an equipment exchange program; provides financial resource information, outreach services, and statewide training on assistive technology issues; and disseminates systems change information.

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Academic Software, Inc.	ED-99-PO-4652	Lexington, KY	3-46
Academic Software, Inc.	RW980370	Lexington, KY	6-17
Accessible Society Action Project (ASAP) Exploding Myths, Inc.	H133A980045	San Diego, CA	6-3
Acme Express Inc.	ED-99-PO-4697	Cleveland, OH	4-33
Adaptive Environments Center, Inc.	H133D60015	Boston, MA	7-2
Alabama Department of Rehabilitation Services	H224A30009	Montgomery, AL	9-4
Alaska Department of Labor and Workforce Development	H224A00002	Anchorage, AK	9-5
Alfred I. duPont Hospital for Children	H133G990182	Wilmington, DE	3-23
American Speech-Language-Hearing Association	H133G70055	Rockville, MD	2-71
Applied Resources Corporation Rehabilitation Technologies Division	ED-99-PO-4636	Fairfield, NJ	3-52
Arkansas Rehabilitation Services	H224A90020	Little Rock, AR	9-8
Arlyn Toolworks	ED-99-PO-4650	Carlisle, PA	3-53
ATTAIN Inc.	H224A00027	Vincennes, IN	9-20
Automated Functions, Inc.	ED-99-PO-4643	Falls Church, VA	3-56
Baltimore Regional Burn Center	H133A70025	Baltimore, MD	2-22
Baylor College of Medicine	H133A60045	Houston, TX	2-18
Baylor College of Medicine	H133A980058	Houston, TX	2-19
Baylor College of Medicine	H133A980073	Houston, TX	2-20
Baylor College of Medicine	H133B40011	Houston, TX	4-9
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Baylor College of Medicine	H133G70103	Houston, TX	2-86
Baylor College of Medicine	H133G990039	Houston, TX	4-30
Beneficial Designs, Inc.	ED-98-CO-0046	Santa Cruz, CA	6-16
Boston University	H133B990005	Boston, MA	5-4
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Boston University	H133G80124	Boston, MA	1-21
Boston University	H133P70014	Boston, MA	8-16
Boston University	H133P990003	Boston, MA	8-17
Boston University	H133P990004	Boston, MA	8-18
Boston University Medical Center Hospital	H133N50014	Boston, MA	2-32
California Department of Rehabilitation	H224A30008	Sacramento, CA	9-9
California School of Professional Psychology-San Diego (CSPP-SD)	H133B70016	San Diego, CA	1-2
California State University	H133G80119	Los Angeles, CA	4-13
Case Western Reserve University	H133N50018	Cleveland, OH	2-38
Catholic University of America	H133E980025	Washington, DC	3-3
Center for Applied Science and Engineering	H133G990115	Wilmington, DE	3-24
Center for Applied Science and Engineering	H224A10005	Wilmington, DE	9-12

Center for Rehabilitation Technology	H133G990048	West Haverstraw, NY	3-36
Center for Rehabilitation Technology	H224B990004	Atlanta, GA	6-18
Cerebral Palsy Research Foundation of Kansas	H133G80077	Wichita, KS	6-13
CESSI	ED-99-CO-0002	McLean, VA	7-12
Charlotte-Mecklenburg Hospital Authority	H133A980025	Charlotte, NC	2-54
Children's Hospital	H133A990019	Boston, MA	1-13
Children's Hospital	H133B980037	Boston, MA	1-5
Children's Hospital	H224A00036	Boston, MA	9-27
Children's Hospital Medical Center	H133G990069	Cincinnati, OH	4-25
Cleveland State University	H133G990036	Cleveland, OH	1-23
CNMI Governor's Developmental Disabilities Council	H224A40007	Saipan, MP	9-41
Community Options, Inc.	H133B980042	Washington, DC	1-3
Connecticut Department of Social Services	H224A20013	Hartford, CT	9-11
Control Systems Research, Inc.	ED-99-PO-4644	Crestview, FL	3-43
Conwal, Inc.	ED-98-CO-0004	McLean, VA	8-2
Coordinating Center	H224A90047	Augusta, ME	9-25
Cornell University	H133A70005	Ithaca, NY	1-14
Cornell University	H133B980038	Ithaca, NY	1-8
Craig Hospital	H133A980020	Englewood, CO	2-46
Craig Hospital	H133G80011	Englewood, CO	2-63
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CYBER Learning Corporation	ED-99-PO-4649	St. Paul, MN	3-51
DakotaLink	H224A20019	Pierre, SD	9-49
Dancing Dots Braille Music Technology, L.P.	ED-99-PO-4767	Valley Forge, PA	3-55
Dartmouth Medical School	H133G70031	Lebanon, NH	2-79
David L. Braddock, PhD	H133F990035	Hinsdale, IL	8-4
Diane Liebert Espinola, PhD	H133F990055	Florence, MA	8-6
Disability Central	ED-99-PO-4704	Lakewood, CA	1-27
Division of Vocational Rehabilitation	H224A30014	Pago Pago, American Samoa	9-6
DSHS/DVR, AT Resource Center	H224A30006	Seattle, WA	9-56
Duke University	H133E980026	Durham, NC	3-11
Education Development Center, Inc.	H133G70143	Newton, MA	3-33
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Emory University	H133A980028	Atlanta, GA	2-47
Enkidu Research, Inc.	ED-98-CO-0031	Lockport, NY	3-61
Eugene Research Institute	H133G80095	Eugene, OR	3-39
FAAST, Inc.	H224A20014	Tallahassee, FL	9-14
Foundation for Rehabilitation Education and Research	H133G990137	Rolling Meadows, IL	4-19
Georgia Department of Human Resources	H224A10001	Atlanta, GA	9-15
Golden Ventures	ED-99-PO-4698	Tampa, FL	4-32

Hawaii Department of Vocational Rehabilitation Services for the Blind and Physically Handicapped	H224A10023	Honolulu, HI	9-17
Helen Hayes Hospital Center for Rehabilitation Technology	H133G50018	West Haverstraw, NY	2-83
Howard University	H133A990020	Washington, DC	4-11
IATP	H224A90038	Springfield, IL	9-19
InfoUse	H224B990001	Berkeley, CA	9-1
Institute for Disabilities Research and Training, Inc.	ED-99-CO-0117	Silver Spring, MD	3-60
Institute for Disabilities Research and Training, Inc.	ED-99-PO-4637	Silver Spring, MD	3-49
Institute for Human Development	H224A40002	Phoenix, AZ	9-7
Institute for Learning and Development	ED-99-CO-0125	Chelmsford, MA	4-37
The Institute for Rehabilitation and Research (TIRR)	H133A70015	Houston, TX	2-58
The Institute for Rehabilitation and Research (TIRR)	H133B50003	Houston, TX	4-10
The Institute for Rehabilitation and Research (TIRR)	H133B990014	Houston, TX	2-12
The Institute for Rehabilitation and Research (TIRR)	H133D60012	Houston, TX	7-7
The Institute for Rehabilitation and Research (TIRR)	H133N50007	Houston, TX	2-40
International Braille Research Center	H133G80103	Louisville, KY	3-30
Iowa Department for the Blind	H133G990195	Des Moines, IA	3-28
Iowa University Affiliated Program	H224A00028	Iowa City, IA	9-21
James J. (Jae) Kennedy, PhD	H133F990001	Champaign, IL	8-10
Jewish Employment and Vocational Service	H133G80099	Laverock, PA	1-24
Kentucky Department for the Blind	H224A90002	Louisville, KY	9-23
Kessler Medical Rehabilitation Research and Education Corporation	H133A980030	West Orange, NJ	2-53
Kessler Medical Rehabilitation Research and Education Corporation	H133G990082	West Orange, NJ	2-80
KRA Corporation	ED-99-CO-0057	Silver Spring, MD	6-7
Kraus Communication, L.L.C.	ED-99-PO-4653	Fairmont, WV	4-35
LATAN	H224A10028	Baton Rouge, LA	9-24
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Los Amigos Research and Education Institute, Inc. (LAREI)	H133B70011	Downey, CA	2-3
Los Amigos Research and Education Institute, Inc. (LAREI)	H133B980024	Downey, CA	2-4

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Los Amigos Research and Education Institute, Inc. (LAREI)	H133G60183	Downey, CA	3-17
Los Amigos Research and Education Institute, Inc. (LAREI)	H133N50020	Downey, CA	2-27
Louisiana State University Medical Center	H133G990169	New Orleans, LA	4-20
Lucile Packard Children's Hospitals at Stanford	H133G990087	Palo Alto, CA	3-19
Lucile Packard Children's Hospitals at Stanford	H133G990103	Palo Alto, CA	3-18
Macro International, Inc.	H133G80048	Calverton, MD	6-14
Macro International, Inc.	HN96015001	Silver Spring, MD	6-6
Mary E. Gannotti, PhD, PT	H133F990027	New Haven, CT	8-8
Maryland Governor's Office for Individuals with Disabilities	H224A90019	Baltimore, MD	9-26
Massachusetts Department of Public Health	H133G70205	Boston, MA	4-21
Massachusetts Rehabilitation Commission/Psychiatric Rehabilitation Training Program	H133G70098	Boston, MA	1-20
Matrix Research Institute	H133B70007	Philadelphia, PA	1-10
Matrix Research Institute	H133G80084	Philadelphia, PA	1-25
Mayo Medical Center	H133A980036	Rochester, MN	2-50
Medicaid Working Group/ Boston University	H133A990014	Boston, MA	2-15
Medical College of Wisconsin	H133N50024	Milwaukee, WI	2-43
Medlantic Research Institute	H133B70003	Washington, DC	2-5
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Meeting the Challenge, Inc.	H133D60010	Colorado Springs, CO	7-9
Meeting the Challenge, Inc.	H133G980013	Colorado Springs, CO	6-11
Michigan Disability Rights Coalition	H224A50009	East Lansing, MI	9-28
Mississippi Department of Rehabilitation Services	H224A00032	Jackson, MS	9-30
Mississippi Methodist Rehabilitation Center	H133A980035	Jackson, MS	2-51
Mississippi Methodist Rehabilitation Center	H133A980067	Jackson, MS	2-16
Mississippi State University	H133B60001	Mississippi State, MS	1-6
Missouri Department of Labor and Industrial Relations	H224A30015	Independence, MO	9-31
MossRehab	H133A70033	Philadelphia, PA	2-57
Mount Sinai Medical Center	H133N50008	New York, NY	2-37
Mount Sinai School of Medicine	H133B980013	New York, NY	4-7
National Rehabilitation Hospital Research Center	H133G80031	Washington, DC	1-16

NBLC, Inc.	ED-99-PO-4695	Panama City, FL	3-44
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Neighborhood Legal Services, Inc.	H224B990002	Buffalo, NY	9-2
Nevada Rehabilitation Division	H224A00037	Carson City, NV	9-34
New England Medical Center	H133B50006	Boston, MA	2-9
New Jersey Protection and Advocacy, Inc.	H224A20007	Trenton, NJ	9-36
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University of Arkansas	H133G70104	Little Rock, AR	1-15
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University of California/Davis	H133B980008	Davis, CA	2-2
University of California/San Francisco	H133B980045	San Francisco, CA	5-2
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University of Florida College of Heath Professions	H133G990500	Gainsville, FL	4-16
University of Georgia	H133G80023	Athens, GA	1-18
University of Guam, UOG Station	H224A40003	Mangilao, GU	9-16
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University of Illinois/Chicago	H133D60011	Chicago, IL	7-6
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University of South Florida	H133B990022	Tampa, FL	4-4
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